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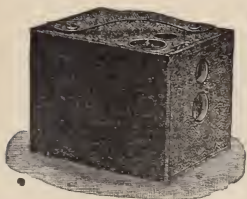
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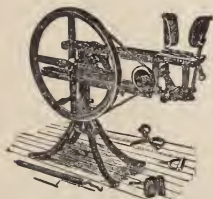
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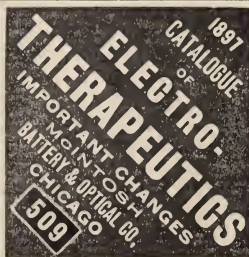
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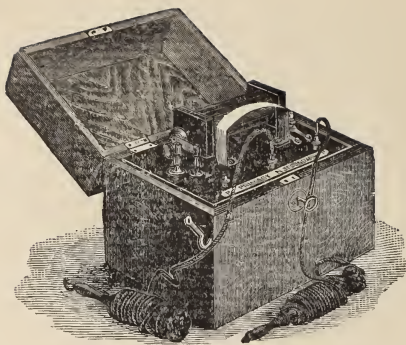
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DENVER, COLO., NOVEMBER 15, 1897.

No. 2.

HOMEOPATHY A SCIENCE.

Lecture by Dr. C. W. Enos, delivered at the Denver Homeopathic College,
Wednesday, October 13th, 1897.

Ladies and Gentlemen; Students of the Denver Homeopathic Medical College: It gives me pleasure to greet you upon this, our first meeting of the fourth year of our college. I take it that you are all here for business. I am here simply to fill up a gap, not as a professor of *Materia Medica*, but simply as a lecturer. However, I am in for it, and so are you.

As far as I am concerned, I want to give you the best possible instruction I can along this line. I shall endeavor to teach strictly in accordance with the homeopathic law. Homeopathy is a true science, although the physician who practices it may make many mistakes in not being able to get a true picture of the conditions as they exist in the patient, or he may not be familiar enough with his *Materia Medica* to prescribe the properly indicated remedy, or he may not give the correct potency, or he may repeat too often, or not often enough, or the remedy he uses may not be pure, nevertheless this is not the fault of the law of *Similia*, neither does it disprove that the homeopathic law is not a true science.

The demonstrations and provings of the law for one hundred years or more have not disturbed the basis, "*Similia*," but on the contrary have confirmed it. The more you investigate the law the truer and surer it becomes. If there is any failure it is in the demonstrator, not in the law. In the first place, it is capable of infinite progress in each of its elements. Such progress does not destroy or deny what has been previously constructed or demonstrated.

The more we study and prove the law, the more fixed it becomes. If it were not a science, a thorough investigation in time would upset the basis; hence it would not be a true science.

The science of the homeopathic law goes still further, and has a second condition, that of prevision. As a proof of this, every true homeopathic physician can testify.

Hahnemann, guided by the unerring therapeutic rule he had discovered, fixed upon the remedies which should prove curative in cholera, that was raging in the confines of Europe, long before it had reached Germany.

Not only does the scientific law admit of the condition of prevision, but of retrovision. Hear what Dr. Hawkes of Chicago says in his opening clinic lecture before the students of Hahnemann Medical College:

"Homeopathy being a science under a rational law, the physician knowing all knowable of his profession, takes each step with as much accuracy and confidence as does the practitioner of any other science." He further says: "In proof of the claim that homeopathy is a science, I will undertake, as the patients are presented before us today, to tell the remedy that has been prescribed in each case when the patient has been positively benefited, without my having previously had communication with the patients or the house physician in regard to the disease or remedy. I will also undertake to indicate the remedy which has not been prescribed in curable cases, when no improvement has resulted."

It is possible for any one of you to be able to do the same thing if you will stick close to the homeopathic law, and study your *Materia Medica* in the correct way.

The physician in treating patients is obliged to take into consideration the science of hygiene as well as the science of therapeutics. There are certain general stimuli to which the human organism is susceptible, such as light, heat, electricity, aliment, atmospheric air, etc. So long as they act in due proportion as regards intensity and quantity, the equilibrium of the functions is preserved, and the organism continues in healthy action. These previously mentioned stimuli, with all that concerns the restoration and maintainance of a proper equilibrium of the general stimuli, belongs to the science of

hygiene." The application of the special or artificial stimuli to the diseased organism belongs to the science of therapeutics.

I would be pleased to follow out this line of thought further, but time forbids. However, this leads us to consider the methods of combatting disease, of which there are three.

First.—Preventive, medicine. *Second.*—Palliative, medicine. *Third.*—Curative, medicine.

Preventive medicine includes everything that physiology, sanitary science, hygiene, etc., can teach. To lessen the developing of disease according to the teachings of Hahnemann, Section 4 of the Organon, "the physician is at the same time a preserver of health when he knows the causes that disturb health, that produce and maintain disease, and when he knows how to remove them from healthy persons." This includes knowledge of asepsis, as well as the judicious use of the homeopathic remedies used in preventing and modifying the development of epidemic or hereditary diseases.

Palliative medicines are of two kinds. First the use of crude remedies for their drug effects, such as the use of opium and morphine for the relief of pain. Emetics for an over-gorged stomach. This treatment, however, does not belong to homeopathy. Second, the carefully selected homeopathic remedy will give prompt and excellent results. He who thoroughly understands the law of similia, and has a thorough knowledge of Materia Medica will not be obliged to resort to crude drugs even when palliative measures seem necessary. Homeopathy has reduced palliative medicine almost to a minimum, especially in the patrons of this school of medicine.

Curative medicine: Homeopathy has much to do in this branch of medicine, and cures without subjecting the patient to new pain and a host of annoyances. This system of medicine, if thoroughly mastered by you, will fulfill your highest expectations.

It is, however, very important that you learn the true picture of each and every remedy that you study, so that when you see its "similimum" in the patient, you will be able to recognize it, although you may not have thought of the remedy for a long time.

It is not my intention to enumerate an unlimited number

of symptoms which are common to many remedies, but to try and paint a picture of the remedy, or in other words to give you the generals of the remedies, modalities, etc., so that you can apply the central truths of homeopathy.

First.—The totality of symptoms of a patient constitute a picture of disease for the purpose of a cure.

Second.—The curative relation between these two pictures of the remedy and disease is the law of Similia Similibus Curantur,

Third.—The administration of one remedy at a time.

Fourth.—The minimum (or smallest) dose that will bring about a cure.

Fifth.—The repetition of the dose.

Hahnemann's latest teachings were to give but one dose, and await its fullest action. No doubt young physicians, and many older in the practice, repeat their remedies too often, and change them too frequently. There can be but one remedy indicated at a time. How foolish then to give two remedies; one or the other is surely not indicated, and acts as a hindrance to the recovery of the patient. It is not the remedy that cures, but the reaction which follows the use of the remedy. It seems reasonable then, that if you keep repeating the remedy and keep up the reaction, a patient will not recover as quickly as he would should we not repeat the remedy. It is a safe plan to follow, never to repeat or change the remedy as long as the improvement continues. By a repetition of the dose, especially in chronic cases, we may spoil the case and be at a loss to know whether or not we have the right remedy. I always give a remedy and await results, which are sure to follow satisfactorily, if I have the right remedy, as the law of homeopathy is scientific, and results will follow the properly indicated remedy, as sure as two and two make four.

The higher the potency the less frequently the repetition should occur, if need be at all, as the higher the remedy, the deeper and longer its action.

Hahnemann says "the aim and art of medicine is to cure disease, and the physician's highest idea of a cure is the rapid, gentle and permanent restoration of health, or the removal or annihilation of disease in its whole extent, in the shortest and

CRITIQUE.

most reliable and most harmless manner, and an easily comprehended principle, that is, with the least possible expenditure of time, money, vitality and suffering."

We have a record of a certain woman who came to our Savior, and who had had an issue of blood for twelve years; she does not say anything about the distress of her disease, but the record says that "she had suffered many things of many physicians, and had spent all that she had and was nothing bettered, but rather grew worse." The physicians who had treated her surely did not understand the homeopathic law of cure.

I have simply given you this outline before beginning the study of *Materia Medica*, I shall take up one remedy at a time and give you a thorough outline of its action as shown by the provings. I trust that I may be able to demonstrate to you in clinics that homeopathy is truly a scientific law of cure.

ALBUMINURIC RETINITIS.

By David A. Strickler, M. D., Denver, Colo.

At no point does the field of the oculist and that of the general physician blend more fully than in this disease. Few diseases of the fundus can be so definitely diagnosed with so little experience with the ophthalmoscope as can a typical albuminuric retinitis.

With a definite diagnosis of this form of retinitis the prognosis in a large majority of cases is death within a year. Its intimate relation then to a disease of import to the general physician and its prognostic significance must serve as my excuse for presenting the subject before this body of practical physicians.

Nephritic or albuminuric retinitis may occur in any form of kidney disease though it is rarely met with except in the chronic form, those which are either chronic from the beginning or chronic as resulting from an acute attack; it occurs most frequently, however, in the contracted kidney, and perhaps least frequently in the lardaceous. Its tendency to occur is thought to bear some relation to the amount of albumin in the urine.

The frequency of retinal changes from kidney disease is variously estimated from seven to thirty three per cent, but from twenty eight to thirty per cent is probably approximately correct.

The retinal changes usually occur late in the disease and are thought to correspond in time with the development of cardiac hypertrophy, though probably not dependent upon it. The renal disease is not infrequently first discovered in the retinal changes in those cases where the renal disease has been insidious in its onset, but has, nevertheless, existed for a long time.

I recall several instances in my own experience where this was true. In one, a lady sent to me by a competent and careful physician for the correction of some refractive error,—I found albuminuric retinitis present, sent her back to him with a request that he examine the urine. He was much surprised and chagrined to find marked albuminuria and numerous tube casts. Prophesied her death within a year which prophecy proved only too well founded. Another, a young woman whose physician found no albumen in the urine in the first examination but subsequent examinations showed it to be an advanced case. I lost track of the case and cannot tell the outcome but the prognosis when last seen was grave. A third and recent case with marked retinitis but in whom several examinations of the urine failed to show albumen, persistent examinations showed varying quantities with death inside of sixty days. I should say of the third case nephritis was suspected by the attending physician but he had been unable to make a positive diagnosis.

Others might be added but these will suffice to show something of the practical import of examining the fundus in obscure cases.

The earliest change in the retina from nephritis is a general haze of a dull or greyish tint in the central region of the retina, generally with some hemorrhages and soft edged, white patches, with or without haze and swelling of the disk. As there is little or no impairment of vision at this time the oculist seldom sees the case in this stage. This is the stage of oedema and exudation, and probably consists of an albuminous exudation into the swollen retina.

In the second stage a number of pure white dots, spots or patches are seen in the hazy region, especially grouped around the yellow spot. Their peculiarity is their sharp definition and opaque, white color which is almost glistening when they are small and round. When not numerous they are generally arranged in radiating lines about the yellow spot; when small and scanty they may be overlooked, but usually large patches are formed by confluence of smaller ones. The disk is swollen at its margin with indefinite outline. Hemorrhages are generally present in greater or lesser number and may constitute a marked feature of the case; the hemorrhagic spots are usually striated. In other cases the papillitis is the most marked symptom though in all cases some bright, white retinal spots can be found by careful examination.

The pathology producing the bright spots is probably a fatty or fibrinous degeneration of the albuminous exudation and also the nerve fibre and connective tissue of the retina.

The third stage is the stage of absorption and atrophy. After many months the white spots diminish in size and number until only a few small ones remain in the region of the yellow spot; the blood patches are slowly absorbed, leaving, in many instances, pigment spots and shrunken retinal arteries. In moderate cases almost perfect sight results. On the other hand, if the optic disk is greatly inflamed optic atrophy results with almost if not total blindness; or if the retinitis and oedema are excessive the sight will improve little or none. In cases of greatest retinal swelling and oedema, death often occurs before the stage of absorption and atrophy. In all cases there will remain a few minute bright dots or some scattered pigment spots to tell the story of past inflammation.

The diagnosis in typical cases in the second stage is simple. There are present the bright shining white spots about the yellow spot; the large plaques due to confluence of the smaller spots; the swollen optic disk with hazy outline and usually striated hemorrhagic spots. When the changes are slight and limited to the yellow spot region they are not so easy to recognize, as the pupil contracts and prevents a good view by one not accustomed to the use of the ophthalmoscope, hence a mydriatic becomes a necessity.

The first stage with its slight opacity and swelling of the retina is not diagnostic, only suggestive. The third stage with its few small white spots in the region of the macula, its scattered spots of pigment, the remains of former hemorrhages, and its partial optic atrophy, points unmistakably to past albuminuric retinitis. The first and third stages require more experience with the ophthalmoscope.

The third stage should be differentiated from retinal degeneration due to extensive neuro-retinitis. In this disease there are usually no hemorrhages, the atrophy of the disk is complete with total blindness—a condition very rare from albuminuric retinitis—and the general condition with past history will assist in the diagnosis.

When the spots and hemorrhages are combined the condition closely resembles the retina in pernicious anaemia. In this disease there is no recognizable perimacular arrangement of spots, the disk is usually unaffected and the retinal degeneration is secondary to the retinal hemorrhages.

In leucocythaemia the white spots are mostly peripheral instead of perimacular; the circular spots are surrounded by a halo of hemorrhage and the tint of the fundus differs materially from that in the albuminuric form.

In both pernicious anaemia and leucocythaemia the symptoms of the malady leave little room for doubt. It should be remembered that in leucocythaemia renal degeneration is frequently present.

TREATMENT.—Local treatment of doubtful value. General remedies alone are of use.

THE CHEMICAL PRODUCTION OF BACTERIA: SOME INTERESTING EXPERIMENTS.

By Julius Hensel, Apothecary and Chemist:

Reprinted from "*Berliner Neueste Nachrichten*."

As there is at present some danger of the passage of a Draconic law concerning epidemics, a law founded on bacteriology and freighted with disastrous consequences to the free determination and to the property of our fellow-citizens, and which would possibly open the door to much arbitrariness in its execution, I deem it my duty to herewith point out the erroneousness of the false theory, which has spread more and more in the last 30 years, as to the cause of diseases, and I must express my astonishment that no one besides myself has so far called attention to this error.

We may surely suppose that every one by this time knows that pathologists have found in all morbid conditions connected with disintegration of the blood so-called bacteria or bacilli. It is thus that it has become common to speak of the bacilli of cholera, of tuberculosis, of typhus, etc.

We cannot entertain the least doubt as to the existence of these little rods (*bacillus*-little rod), the only question is about their significance.

There are those who assert that these bacilli are endowed with life, and the persons believing this also seem to suppose they multiply themselves by an offspring generated by themselves, and that during their existence they exude poisonous juices and thereby cause disease and death.

Other investigators, to whose number I myself belong, view the matter in quite a different light. They regard the bacilli as lifeless products of chemical disintegration, and attribute their origin to the gelatin of the blood. According to this view the bacilli are nothing but short, needle-shaped, little crystals, neither plants nor animals, not provided either with digestive, sexual or sudatory organs, subject indeed, to destruction, but incapable either of growth, of the consumption of food or of reproducing a progeny.

To decide between these conflicting views there is only

one way; first of all, we must determine of what chemical elementary bodies the substance of the bacilli is composed.

No one has, however, as yet entered upon this inquiry, and no one could enter upon it, because it is not practicable to collect such bacilli in ponderable quantities, in order to then enter upon their chemical analysis. They are too minute to be *e. g.*, seized with pincers; yea, *they are almost invisible*. To see them with the eye we need a very powerful microscope. I well remember that Koch answered the question why he had not sooner discovered the cholera bacillus by saying: "I had not as powerful a microscope as I have."

This explains why no chemist has hitherto had delivered to him a sufficient number of bacilli taken out of their viscous blood-gelatin to enable him to determine their chemical nature. As soon as this should become possible, as soon as the light of chemistry could be shed on this darkness, the present science of bacteriology would at once lose its present importance and influence, and like the *Kochin* it would merely furnish the historian a new phase in history of the development of medicine.

If I now undertake to furnish such a light this is done in view of the fact that but rarely has the fence which prejudice and blind faith in authority have erected like a palisade, and which limits the horizon, but rarely has this stockade been passed by any person belonging to the immediate circle of those most nearly interested. The declaration of new views has nearly always to be made outside of this barricade.

But to facts! I have produced by a chemical method bacteria by the thousand millions, which *could be weighed by the ounce*, and I am therefore in the position of being able to give reliable information as to the chemical composition of at least *one* kind of bacteria.

The time required for this experiment was considerable. Many an experiment was in vain. The *ways of error* are by nature very much involved and extend in ten thousand different directions, while the way of *truth* is but one straight path. My experience was like that of the inventor of the computing machine, who only succeeded after ten years effort, and then was astonished that he did not hit upon its simple construction at once on the first day.

The way of my research passed by the following stages: *Glue* (gelatin), *blood-gelatin*, *blood-discs*, *serum of the blood*, *gall*, *urine*, *uric acid*, *hippuric acid*, *lencine* (gelatin-albumen) *glycin* (gelatin-sugar), *syrosin* (benzaldehyde-glycin), *benzoic acid*.

I shall now briefly describe how bacteria may be produced: Neutralize carbonate of ammonia, dissolved in water, with benzoic acid, put the concentrated filtered solution into a porcelain dish and add to it the concentrated solution of an equivalent quantity of acetate of lime, stirring the mixture with a glass rod. From this there will arise a thick pap, from which after standing awhile, thousands of millions of bacteria, just as depicted in the book, will separate themselves.

The chemical nature of these bacteria is plain. They represent the smallest molecules of benzoate of lime, and they, therefore, under the microscope appear as of absolutely equal dimensions. The fluid in which they swim and from which they may be separated contains acetate of ammonia. Nothing therefore, occurs in this case but one of the most ordinary chemical mutual decompositions.

Another kind of bacteria I produced by dissolving 122 parts of Benzoic acid in alcohol and dissolving in this solution 223 parts of gelatine, which had first been allowed to swell up in water. The presence of the benzoic acid in this case prevents the gelatine from becoming insoluble in alcohol, as is else the case; on the contrary, when the bottle is warmed over an alcohol lamp it unites by warming into a clear solution; a proof that as benzoic acid chemically unites with *glycerin* into hippuric acid, so it also chemically unites with undecomposed gelatine. Now if water is added to this solution we again obtain a turbid pap of bacteria, but these bacteria cannot be filtered from the fluid which remains viscous, nor do they remain constant, for if sufficient water is added they will dissolve in it.

I return to the first variety. The question is justified. What have *benzoic acid*, *acetic acid*, *lime* and *ammonia* to do with human blood? The answer is: very much. All of these constituents are found together in blood which is in a morbid state. For first of all, all blood-discs (the morbid as well as the healthy ones) contain *lime*; secondly, in certain forms of

anaemia *acetic acid* can be shown to be present in the blood; and thirdly, *ammonia* combined with glycollic, *benzoic acid* (hippurate of ammonia) is a natural product of the oxydation of blood-gelatine consequent on respiration; this compound is present in the urine of *all* men, but in the largest quantity with vegetarians, and points naturally to a *product of excretion from the blood* affected by the kidneys.

Benzoate of lime is soluble with considerable difficulty even in pure water, it must all the more easily separate itself from the viscous blood, which from one cause and another has become thickened from loss of water, as, *e. g.*, by perspiration in the parching heat of summer, which, as is well known causes most of the epidemics, or through watery stools from colds in autumn.

If bacteria should then be found in the blood, they are indisputably not the *cause* but the effect of the pathological state.

That by means of inoculation with the chemically disintegrated serum which inevitably clings to the bacteria a similar disintegrating process may be transferred also to other blood, does not prove anything as to the infectious nature of the bacilli, but only confirms the well known chemical fact that the nitrogenous albumen, and thus also the blood-gelatine which is rich in albumen, when once it has entered on a certain kind of chemical decomposition, draws other gelatinous substances, as long as they can be found near it, into a *similar* process of decomposition. It is this very easy transferability of its hydrocarbon groups which enables it to assist in the new formation of the most varied glandular organs, and in general of all the bodily tissues which are subject to continual chemical transmutation owing to constant respiration.—*Homeopathic Envoy.*

URETHRITIS.

By F. C. McCurtaine, M. D., Denver, Colo.

Excerpts from a paper read before the Homeopathic Club, Oct. 25th, '97.

Urethritis is a catarrhal inflammation of the urethra which may be acute or chronic, specific or non specific. The latter is more commonly known as Gonorrhea, which is a mis-nomer, being so called by ancients because they thought it was an excessive flow of semen.

It is curious concerning a disease dating from biblical times that physicians should so differ as to the nature of the trouble and its symptoms, yet a great advance has been made since the discovery of micro-organisms, and the medical mind has crystalized around the idea.

Gonorrhea or specific urethritis is due to a coccus, the uncertainty mentioned is due to the evolution of the symptoms. It is difficult to read a satisfactory description of the disease as the writers differ so much, and no two agree as to treatment.

Gonorrhea and syphilis were once supposed to be allied, if not indeed identical, the ancient teaching being that there was little danger of gonorrhea turning to syphilis unless the discharges be suppressed by astringents. John Hunter first endeavored to demonstrate a distinction between gonorrhea and syphilis, but unfortunately the patient of the experimenter also had a chancre. Then later it was advanced that there was a specific virus, and that gonorrhea must always come from a preceding gonorrhea. Neisser first pointed out in 1879 little points in the pus which were found to be cocci. It was demonstrated that these were only found in gonorrheal pus, so he claimed they were the specific element. You must not expect to distinguish gonorrheal matter from any pus containing staphylococci, unless you know before hand what to look for, and know the difference between a coccus and bacillus. A coccus is a simple point, and a gonococcus is peculiar in that it is a diplococcus, there are two side by side, being separated by a little interval, and the two adjacent sides are flat, giving it the name of biscuit coccus. There are several staining processes, and to absolutely know when we have a gonorrheal pus we must go through a test in this way also. Grams test will be found one

of the best, but with all these difficulties of diagnosis you may expect when a man comes to you complaining of the ordinary symptoms that he has gonorrhea and treat it as such

Symptoms and Course. In some persons the trouble may be very mild, and in others run a severe course. In true gonorrhea the symptoms are about as follows: A few days after impure connection, from four to ten days, there is an itching and tingling sensation at the meatus, the lips are just a little redder and fuller than natural, and upon pressing there exudes a little sticky fluid, a burning sensation now develops within a few hours with an increase of moisture, in a few more hours the burning is greatly increased and there is a creamy white or yellow discharge. This is followed by an aggravation of all the symptoms, burning intense, the act of micturation agonizing, there will be some oedema,—the longer the produce the greater the swelling,—the height of the trouble is reached in about five to nine days, and continues about two or three weeks, when we have a stage of decline, and heaven only knows how long this will last.

Diagnosis. Don't accept that of the patient, examine the organ to exclude any condition which might be mistaken. He might have chancre, which would cause a little discharge; he might have balanitis or a prostatitis, therefore exclude all such conditions.

Treatment. Nearly every remedy in the *Materia Medica* has been recommended. The greatest diversity of opinion exists here also, and you will find new prescriptions in nearly every medical journal you read, all of which goes to show that no new method up to the present time has given perfect satisfaction, yet every man about town has a prescription that will surely cure in a week. Tell your patient that you cannot tell if he will be well in two weeks or two months. Just as sure as you make promises you will have to modify them and try again. The trouble is, the disease is self limited, and may get well if left to itself. You may cut it short with remedies, but few of them seem to have anything like a specific action, and when they do seem to, it is my opinion that you have a simple urethritis to treat which would have gotten well within a few days without medicine at all, yet it will be your privilege to always

take the benefit of the doubt. However, I would suggest in the inflammatory stage such remedies as aconite, cannabis, belladonna when there is extreme burning, apis if much oedema. Gels. gives good results in some cases where there is sudden stopping of the discharges with epididymitis. For the stage of decline, when the discharge is reduced and no burning or micturition, the selection of a remedy is difficult. Many cases are due to a debilitated condition, not only of the canal but of the system at large, and need a constitutional remedy. Compare ferrum, capsicum, sepia, thuja and sulphur. As to local treatment, in the first stage use nothing unless it be hot baths or hot injections not medicated. Do not over-treat your case at this stage. After the discharge has continued a week or ten days you may use an injection with a view of stopping the discharge.

As to stricture, gonorrhea being the more common cause, and the height of the inflammation being for the first ten days or two weeks in the anterior urethra, the stricture is more often found there. Nineteen out of every twenty cases of gleet come from some irregularity of the lumen of the urethral canal; therefore cure your stricture and you have the gleet cured in nearly every case; if not, a few injections of a mild astringent will finish the cure. The size of the stricture can be determined only by the use of a urethrometer. Introduce the instrument, pass the stricture, dilate to just the size of the caliber of the canal at the point of stricture and note on the dial the size. In dilating use sound one size larger, and don't repeat the dilation until all inflammation has subsided, which is usually in a week's time. There are several methods of treating stricture; by dilating, cutting, and electricity. For stricture within three inches of the meatus, use internal urethrotomy. For deep stricture, or near the junction with the membranous urethra, use dilatation or electricity, or we may do external urethrotomy. A stricture that is deep is usually located at the junction of the membranous with the anterior urethra, and is the most difficult to cure permanently. There are few strictures located within the membranous urethra, and no organic stricture in the prostatic urethra. A few dilations will usually cure a spasmodic stricture, especially if used in conjunction with the administration of such remedies as Hyosciamus, Bell or Nux.

Now just a word on preventative treatment, there have been several methods mentioned by different standard authors. I noticed in one of the Denver medical journals the only satisfactory method I have ever read; "Obey the seventh commandment."

THE PRESENT STATUS OF HOMEOPATHY.

Excerpts from the Annual Address of W. A. Humphrey, M. D., President of the Missouri Valley Homeopathic Medical Association.

Of all the creeds that have come into existence, homeopathy alone is the only one that has stood the test of time and opposition, and that has come out stronger and better than before. The virulence of our enemies has been unlimited. Many times have we received the fatal dose, and had it repeated, and still we come forth unscathed, only better and stronger. Of all the epochs or cycles in medicine which have come and flourished for a time and disappeared, tried and found wanting, *only* the laws of similars remains to tell the story of the test, shining to-day better, brighter than ever before, its praises being sung by more tongues than ever in the history of its existence. It has stood the crucial test by the bedside, the final test of all theories medical, the clinical verification. Ours has been one steady course of advancement from an obscure beginning to the present exalted position in public confidence, to which any representative of our profession may point with jealous pride, because he knows full well the value thereof, and the cost at which it has been earned.

We point with satisfaction to the advanced position of our colleges, which are already as good as the best in the land. I say this without boasting. No unbiased individual can for a moment question this statement. The homeopathic colleges are *leaders* in advancement of medicine. The Philadelphia Homeopathic Medical College was one of three colleges of all schools in the United States, to be first in requiring a preliminary examination in Biology. Dr. John B. Roberts, of Philadelphia, President of the State Medical Society of Pennsylvania, at the

Pan American Congress, 1894, said: "It is a notorious fact, few of our students have any knowledge of Biology when they commence the study of human anatomy. "———" It is a little embarrassing to know that students entering the Homeopathic Colleges, are required by the American Institute of Homeopathy to possess a broader general education than is demanded of our students by the American Medical Association, the Associations of American colleges or our best American schools. The preliminary educational requirements of Hahnemann Medical College of Philadelphia include Botany, Chemistry, Biology, Physics and Latin. Certainly not more than two of our schools include all the topics in the entrance examination,"

This honest confession was made in 1894. If the author of the above were to revise it in 1897, he would be obliged to confess that every homeopathic college in the United States is in the same classification with the one above mentioned. Time has already obliterated any criticism upon the medical education of physicians of our school. The entrance examination to our colleges is the equal to the best in the land. In many colleges it is the superior to those of the Allopathic school. In none is it inferior. Yet, up to the present year, no qualification, however faultless, has had a moments consideration at the hands of the regular school. But the year 1897, A. D., has witnessed a change, a radical change, a change not for the worse, *possibly* not for the better, but let us hope it is a step forward at least. * * *

The vantage ground that has been gained, has not been won single handed. It is the result of concentration of those forces found in the individual, who is willing to cast his mite for the common cause. In this effort, our societies have been the moving spirit. If we would continue the pace, we must perpetuate the societies. If you and I expect protection under the law, and just recognition at the hands of a thinking public, we must patronize our societies. To our societies we owe the growth and upbuilding of our cause. The fellow who never goes to a society meeting, perhaps never thinks how much he owes to those who do go and sacrifice their business and their time for the advancement of the cause which he would have preserved for his own personal aggrandizement.

ALLOPATHIC WANT OF FAITH IN DRUGS.

From the Medical Times and Register.

A highly important contribution has lately appeared in the Post Graduate on the subject of drug therapy and the tendency of our times to generally ignore the principles of drug treatment.

No more timely topic can be considered, for it may as well be honestly confessed that the average graduate of our regular medical schools knows practically little or nothing, of the physical, chemical or pharmaceutical properties of medicines, an important, indeed the most important, branch of the healing art; *something in which he has been far outstripped by his homeopathic rival, who it must in all fairness be conceded, is the most successful practitioner.*

"By a man's work you shall know him," says Holy Writ, and applying this to the field of medicine, we may as well open our eyes and admit facts, for however we may deplore it *homeopathy is making tremendous strides forward, and today in our larger cities is notably gaining rapidly. It has the cream of practice.*

So strong is Homeopathy become in New York that the specialists among the regulars, impatient to catch some of the sheekles from consultations with this refined type of modern quackery, threw overboard all codes and went into professional anarchy, thanks to which the followers of Hahnemann in that one city soon enlarged their numbers to more than 1000 members—about one-third of all the practitioners in that city—and are now quite independent of the regular specialists whose motives they well understood, as they now have their share of all our hospital work and annually train more specialists than they need.

Our modern graduates have grown into therapeutic nihilism and ignorance, through various causes, the most dominant of which are the prominence given to pathologic and morphologic studies of dead tissues and omnipresent bacterium; to the custom of filling the chair of Materia Medica and Therapeutics in our under-graduate schools with raw fledglings, "the general utility men" of the faculty, without seasoned and extensive experience. They teach nothing of practical experience, for they know nothing. The writer has a vivid recollection of one who several years ago temporarily filled such a chair. As soon as he commenced, the students quite generally turned to their

newspapers or began to doze. Another instance comes to mind of a young man ambitious for professional honors, who had \$10,000 to put up. The faculty, though not desirous of a novice, yet needed his money, and gave him the chair of "Materia Medica."

The proprietary medicine man has worked havoc with legitimate pharmacy and has done much to demoralize the influence of medical therapy. The extension of the term of study to four years and the practical extinction of the preceptor, with the monopoly of teaching by the medical colleges, has, perhaps, been the most baneful of all. No amount of class teaching can ever take the place of personal instruction.

But this whole subject is of vast importance; for the practitioner who has not been thoroughly grounded in medical therapy is a very inadequate man for the demands of his calling. Let practitioners and colleges give more attention to teaching materia medica, and, when possible, allow the student some months in a pharmacy before he launches out to prescribe potent remedies, the chemical and therapeutic properties of which he knows scarcely anything.

MATERIA MEDICA DEPARTMENT.

Conducted By Clinton Enos, M. D., Professor of Materia Medica in the Denver Homeopathic Medical College and Hospital.

INTRODUCTION:—I have been requested to take charge of this department in the CRITIQUE. The object to be accomplished is to awaken a greater interest in the study of materia medica. I say "study of materia medica" for no amount of matter written on the subject will ever increase our knowledge unless we do some hard digging ourselves. It will be our duty to collect articles for this department each month. Most of the material will be from the lecture room of the Denver Homeopathic Medical College. However, any paper from the outside will be thankfully received. From time to time, I shall also say a few words as to the correct method of prescribing. A wide range of opinion exists as to this, but we hold the principles derived from Hahnemann's writings to be the best, and therefore the only method to follow. I shall state the principles as follows. 1st. The similar remedy. 2nd. The single remedy. 3rd. The potential remedy. 4th. Not repeating

too often. It may not be in the accepted line of *materia medica* to discuss such questions, but we know that many of our physicians are floundering in the slough of mongrelism because of a lack of proper understanding of the laws governing Homoeopathic prescribing. To have a correct knowledge of our *materia medica*, one must know the correct method of applying the remedy.

PHYTOLACCA.

This is a medicine that is generally neglected by many of our physicians. All of us, perhaps, know of its efficacy in a certain kind of mastitis, but this is only a small part of its usefulness. Although the remedy has not been thoroughly proven, yet we know enough of its action to warrant us in using it in many cases, both acute and chronic. It has a deep action and brings about changes that correspond to the nature of the chronic miasms of psora and syphilis, and is somewhat similar to sycosis. Its sphere of action is allied to that of *Aurum* and *Staphisagria*.

In a general way we find that *Phytolacca* affects the glands. It produces painful, enlarged and indurated glands. They have a lobulated or knotty appearance. The mucous membranes become changed in that they become inflamed and ulcerated. They have a dark red or a sort of purplish or bluish appearance, with an offensive discharge of bloody pus or bloody water. The patient is worse in damp weather and at night. Some complaints are worse from warmth of bed. The female is worse during pregnancy. In the mental sphere there are not many symptoms of importance, owing, no doubt, to the poor proving the drug has had. One symptom, however, shows an erotic tendency of the mind in stating that she has complete shamelessness and indifference to exposure of her person. Gloominess, irritability and oversensitiveness to pain are also present.

Now let us take up some of the most prominent complaints that the remedy cures, and study them. Of course we must keep in mind the nature of the drug as stated above.

For the mammary glands it has great affinity. It probably outranks all other remedies for its action upon this gland. After parturition there are redness, tenderness and nodulated indurations in the breasts, with chills and a tendency to early

suppuration. The nipples are sensitive, cracked and excoriated, and perhaps are constricted by cicatrices from former abscesses. (It rivals Graph. in this particular). When the child nurses it causes intense suffering to the mother. When the milk is pumped out it has a thick, stringy appearance. Perhaps the mastitis is of several weeks standing. In such cases the gland has one or more hard lumps that discharge an offensive, excoriating bloody or watery pus through fistulous openings. In addition to these particular symptoms, there may be present the general concomitant symptoms; as a lack of modesty when exposing her breasts, worse at night, worse in damp weather, gloominess and oversensitiveness to the pain in the breasts. Taken as a whole, you can readily see that this case is different from that of every other remedy.

If we examine the throat we see some striking features there. The tonsils and palate are inflamed and are of a dark bluish or purplish appearance. The parts are sore, swollen and ulcerated, and feel hot as if a red-hot iron ball had lodged there. On attempting to swallow there is great pain at the root of the tongue and sharp pains shoot to the ears, and liquids regurgitate through the nostrils. The patient cannot swallow *hot* drinks. Both or either side of the throat may be attacked, however, the right side suffers the most frequently. With this, the general character of the remedy crops out in that the glands of the throat become swollen in nodular indurations. It does not make any difference whether this is a simple sore throat or whether it is syphilitic; the remedy has the power to cure either. Even if it be diphtheria, *Phytolacca* will cure if the case is like the above. Of course there will be present the membrane, prostration, etc., that go with this disease.

Pains simulating rheumatism and gout are often of a *Phytolacca* type. It does not make any difference whether the trouble is of a psoric or syphilitic origin. The pains may be located in almost any tissue. It has cured rheumatism of the scalp, arms, chest, back and lower extremities, involving the muscles, periosteum and nerves. The character of the pain is dull, drawing, aching and at times lancinating. The pains have a tendency to change from place to place, or else alternate in severity with some other complaint of the patient. The

rheumatism is worse at night, from warmth of bed, damp weather, motion, pressure and usually from applied heat. If we study this description carefully, we shall see that *Phytolacca* is different from all other remedies. The most similar remedies, in this connection, however, are *Staph.* and *Merc.* In *Merc.* there is no tendency for wandering pains and there is profuse sweat without relief. This you see, is different from *Phytolacca*. In *Staph.* there is a tendency for the disposition to be cold-blooded; in *Phytolacca*, to be hot-blooded. That is, one can endure the heat better than the cold, and the other the cold better than the heat. In *Phytolacca* rheumatism there is apt to be present some other trouble, as enlarged glands or catarrh of the character already described.

Let us remember that in a typical *Phytolacca* patient, *Rhus-t.* and *Bry* (although apparently similar to *Phytolacca*) are worse than useless for their natures are entirely different from that of *Phytolacca*. Many of us make grievous mistakes in this particular, in prescribing for the superficial appearance, instead of for the nature of the trouble.

This much has been written in an attempt to bring out the general nature of *Phytolacca*. I shall not take up the different regions of the body and study the symptoms found there, for this would lengthen my paper beyond your endurance, and besides they can be found in any good work on *materia medica*. But to show how nicely the particular symptoms fit in after we have got hold of the general nature, let us look at the headache. We read that it is dull, heavy and severe and is one-sided, just over the eyebrows. With this there is vertigo and impairment of vision and perhaps sickness at the stomach. Now, if a rheumatic, diphtheritic, "bilious" or any other kind of patient, needing *Phytolacca*, has a headache, it will be of this character. The one belongs to the other. So, if in like manner, we take our *materia medica* and study each anatomical region of the body in the light of the general nature that we have tried to describe, we shall soon become thorough masters of this remedy.

A good method with which to study the *materia medica*, is to learn the remedy first and then study the symptoms.

THE CRITIQUE.

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All books for review, magazines, exchanges, correspondence and articles for publication in this Journal should henceforth be sent to Dr. S. S. Smythe, Editor, 403 California Building, Denver, Colorado.

All business communications should be addressed to Dr. J. Wylie Anderson, 16 Steele Block, Denver, Colorado.

"STRICKLER'S STATISTICS AND THEIR LESSONS" is the significant title of a most interesting and instructive paper in the October North American Journal of Homeopathy, by George B. Peck, A. M., M. D. It has long been a matter of surprise to us that the very important statistical data which Dr. Strickler's committee has presented to the American Institute have received so little attention from the profession at large, the medical journals and even the Institute itself. No stronger argument in support of the claims of our school to superiority over all other systems of practice can be found than the figures and comparisons furnished by these reports. We are, therefore, pleased to see Dr. Peck take up the work and review it in such a masterly manner. After pointing out the great value and reliability of Dr. Strickler's statistics, and giving many telling comparisons in relation to various diseases treated by the two schools, Dr. Peck concludes his excellent paper in the following significant language:

"Most strikingly do the figures above cited display the stupendous folly of homeopathic mongrels. Professing a knowledge of that which their own acts prove them to be completely ignorant of, dazzled and bewildered by the glittering bubbles wafted before them each season only to be shattered the next, they recklessly seek to conceal their own inhuman, yes crimi-

nal laziness by the partial adoption of every passing fad to the serious detriment, if not immediate destruction, of those who confide in their bold protestations of broad liberality. The paths of truth are straight and narrow, those of error wide and devious. Science is 'that which one knows' (Worcester), but none have declared and none can declare when one drug should be administered in preference to another, save Hahnemann and his followers. The dominant school deny the possibility of such a declaration. The half million unnecessary graves scattered annually over this broad land (according to Strickler and I do not deem his estimate extravagant, though as yet without the opportunity to verify it by my own calculations), are irrepressible and unanswerable witnesses against the ignorance and unskill of pretended scientists. And these are the great people our mongrels ape! An analytical inter-comparison of the reports from the various cities would reveal the character of our colleagues found in each. Such an investigation, however, would prove more interesting than profitable. A hint of the possibility conveys the appropriate lesson. The time now is when every man shall be judged by his works more absolutely than ever before. See to it then, that each required report and death certificate, as well as each prescription, is so made that you are not ashamed thereof, lest some fine morning you awake with deep chagrin to the unpleasant consciousness that your fellows are ashamed of you."

The following from the *Medical Century* for October, though brief, is really important:

"The *Denver Journal of Homeopathy* for September speaks of Dr. B. F. Bailey, of Lincoln, Nebraska, as 'the next President of the American Institute.' Dr. Bailey should get some one to protect him from his impolitic friends. There are two or three good men and true in line of promotion before he can be brought successfully forward, and when the right time comes his friends all over the country wish to accord him their loyal and enthusiastic support.

In order to clear away any doubt we must plead guilty to being 'his impolitic friends' and assume the entire responsibility.

ity. No one else had a thing to do with it, and so the Century and the two or three other good men and true need not worry about having Dr. Bailey protected. When we proposed the name of Dr. Bailey, we expected to bring down some big game and were not all surprised at the result. We had positive knowledge that at least two good men and true were in the hands of their friends immediately after the close of the Buffalo meeting and as we do not believe in the *still hunt* variety of politics in medical matters, we shied our castor for Benjamin F. Bailey just by way of example for better and more honorable methods. Ward politics and the secret Australian ballot should be ruled out of the American Institute as beneath the dignity of an honorable fraternity. Still hunts, free whiskey, free cigars and "headquarters" should be the signal for defeat in every instance. The Presidency should be within the aspirations of every member. What matters it how many candidates there may be? Let a dozen members run for President if they so desire, on the condition that they come openly before the convention and manfully accept the result of an open and untrammelled ballot. Encourage a friendly contest for the great honor to be conferred, and thus avoid all personal ill feeling afterwards.

It matters little to us who may be president, only this we will say, that no candidate who does not come out openly, can ever have our co-operation or support. If Dr. Bailey shall stoop to the level of the demagogue, then he will not be our candidate. We are opposed to the aspirants referred to by the Medical Century because we know that their methods are the methods of the politician, and are not worthy, therefore, to be elevated to the highest place within the gift of our profession.

We speak thus frankly, and without malice, because we hold the honor and good name of our National Society above all personal considerations. It is only by the most watchful

care, fraternal forbearance and professional sincerity that we may hope to retain the loyal support of a united profession,

The politicians of Kansas are so noted for springing upon the unsuspecting public some phase of so-called social reform at least once every year, and sometimes twice in a year, that surprise is no longer expressed at any new manifestation of political unrest in that land of vagaries. To the credit of the medical profession it can be said that up to a very recent date, its members have gone along in their usual quasi war-like attitude like their colleagues elsewhere, with a chip on one shoulder only. Now, however, we are informed, by the Topeka daily papers that for the first time in the history of medical societies, the Homeopathic, Electic and Allopathic State Societies have each appointed committees for the purpose of arranging a joint meeting of the three schools to be held in Topeka some time during the month of May, 1898, and annually thereafter.

The names on the homeopathic committee are Doctors C. F. Menninger, L. A. Rider, C. H. Lowry, J. N. Jenney and A. M. Hutchinson.

We do not know who is responsible for this abnormal alliance, but we are ready to wager a new beaver that there is "a nigger in the wood-pile" somewhere, and that said nigger is regular. We make the prediction that the allopaths are in this thing for a purpose all their own. Their nature is not known to have changed, except for the worse. Their overtures to homeopaths are always of the feline variety. There is a claw concealed somewhere ready to be used on occasion. When the crucial test shall come, as it will in due time, these purring friends will belie their religion, defile their honor and break the most solemn pledges, in order to strike a blow at homeopathy. Then the doctors of Kansas will carry chips on both shoulders.

CRITIQUE EXCURSION.

The "CRITIQUE" has received a number of inquiries from physicians throughout the East, and especially in New England, New York State, Pennsylvania and Ohio, regarding the expenses of a trip to Colorado and through the Rocky Mountains, after the Omaha Convention next June, and as we have received such a large number of these requests, the "CRITIQUE" has taken upon itself to arrange for a personally conducted excursion from Omaha to Colorado and Utah, taking in all points of interest in the West, to consume in the neighborhood of six days.

We are now arranging with railroad people and hotels to make this a grand success. The number will be limited to 150.

The "CRITIQUE" has consulted a number of physicians, especially at Denver, and arrangements are under way to give our brothers throughout the East, a trip from Omaha through the gold and silver country, in a train most magnificent in all its appointments. Arrangements will be made to make stops at all points of interest as far West as the great Salt Lake.

Our idea of mentioning this matter at such an early date is to bring it before our eastern associates in order that we may receive an expression from as many as possible who are contemplating a trip West of Omaha after our convention, and further information as to the trip will follow.

As we have found a number who express a desire to go to California, it may be possible that we will have a second party to extend their trip from Salt Lake to the Pacific Coast.

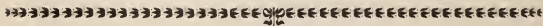


THE DEATH OF PROFESSOR TENNANT.



The sudden death of Dr. C. E. Tennant on the morning of November 4th, came as a shock to his professional colleagues and to his numerous friends in this community. It was well known that he had been suffering from diabetes for the last year or more but his condition had not been considered alarming or dangerous.

Dr. Tennant was born in Chataqua County, N. Y., in 1838. When quite young he went to Wisconsin where he found employment in a pharmacy and later engaged in the business for himself. In 1861 he enlisted in the first Wisconsin Cavalry Volunteers and went to service in south eastern Missouri. Exposure in the field and in rebel prisons so shattered his health that he was obliged to leave the the service in 1862, and was never afterwards a well man. He began practice as an Allopathic physician but after some years became interested in homeopathy, took a post-graduate course in a homeopathic college, and continued in that practice up to the time of his death. Although always a great sufferer from the effects of his army experience, he was noted for his cordial and genial disposition, which brought him many devoted friends. Frank and honorable in all things he was highly esteemed by his professional associates. He always manifested great interest in educational and society work and was an excellent teacher. When the Denver Homeopathic College and Hospital Association was organized he was one of its most zealous promoters and was made Professor of Pediatrics, which position he held at the time of his death. Professor Tennant will be sadly missed in the class room and in the Homeopathic Club, of which he was vice-president, as well as in the home and social circles where he was so much loved and admired.



OUR MONTHLY REVIEW.

North American Journal of Homeopathy.

Form of Snake Poisons. Dr. E. C. Price, Baltimore.—This notable article closed with these paragraphs.

In this immunized effect of dilute snake venom against lethal amount of similar venom, I believe we have an illustration of what we take to be the law of similars.

The objection may be raised that this is isopathy, not homeopathy; but I contend that there is no such thing as isopathy, unless it be agreed that *an equal* part of the *same thing* will cure a condition which it has produced. As an example: A man is bitten by a cobra and is about to die; the isopathic remedy would be, nay, must be, a second bite by the *same* cobra. Change the character of the venom used to remove the effects produced in the first instance by the venom, in the slightest degree, and isopathy is no longer the principle under application, the remedy becomes *similar*, not the same. I think this must be obvious, therefore, without further argument or illustration, that the application of antitoxic venom serum to the cure of snake bite is an illustration of homeopathy.

Might Dr. Price have not gone still further and said that even this "second bite of the same cobra" would not be identical with the first, since both the physical and mental states of the cobra are constantly changing, varying in a measure, however small, thus in slight degree modifying the nature of the venom?

Prof. Chas. S. Mack, author of *Practice of Medicine*, begins article with this sentence: "It seems probable that at some future time all physicians will be homeopaths." He argues that homeopathic physicians should have a correct understanding of the end sought where they give a remedy, and not claim it as curative when it is used as only one of many useful means to *assist*, and not intended to *effect* a cure in and by itself. With such clear understanding, and with a willingness to accept other useful but harmless methods, *similia*, he thinks would sooner or later, come to be accepted by the average physician of the old school.

Hahnemannian Monthly.

Intestinal Antisepsis in Typhoid Fever. Prof. A. K. Crawford.—He thinks no complete antiseptic for the typhoid poison has yet been found. All the good results claimed from the use of intestinal disinfectants he has secured without them,

and concludes with saying. "My belief at present is that there is no such thing in the practice of medicine as an intestinal antiseptic in typhoid fever."

Hysteria in the Male. A. P. Williamson, M. D., L. L. B.—He makes the following deductions.

First.—Hysteria is a disease of the cerebral convolutions. This point is proved by the fact that many of its manifestations are evidently beyond the control of the patient, and also by instances in which insanity has followed it.

Second.—That it always has an hereditary basis, as disclosed by ancestral history or marks of degeneracy.

Third.—That it should never be considered trivial, its liability to recurrence and tendency towards chronicity always being present.

Fourth.—That the exciting cause is generally reflex.

Fifth.—That its distinguishing features are its peculiar anatomical distribution in motor and sensory spheres and the extreme selfishness of its disturbed mental manifestations.

Sixth.—That the disease is less common among women than popularly supposed, and more frequent among men than commonly suspected.

The drugs used in the order of frequency were hyoscyamus, ignatia, pulsatilla and aconite.

Proving of Thyroid Extract.—Dr. Hessler, of the Northern Indiana Hospital for the Insane, has made a proving of thyroid extract. Large doses of the extract given to a patient for catalepsy, developed symptoms of exophthalmic goitre, and had to be discontinued. The catalepsy then returned, and upon the use of the extract for that, symptom of goitre again developed, which in turn disappeared as the extract was again suspended. This would seem to be a homeopathic indication for the use of thyroid extract in Basedow's disease.

Benefit from Thyroid Extract in Goitre. Prof. H. Lossen, Germany.—The Professor treated a case of simple goitre of over 20 years standing with alcoholic injections. These benefited the case, but failed to work a complete cure when small doses of an extract of the thyroid gland of a sheep was given with the effect of still further reducing the size of the goitre.

Mercurius Biniodatus in Asthma.—The action of *Mercurius* in these cases is not attributed to pure homeopathy, but explained according to Dr. Haig's *Theory on Uric Acid as a Causative Agent in Disease*. He states that the asthmatic paroxysm is due to nature's efforts to rid the system

from the accumulation of over feeding and lack of exercise. The temporary presence of this acid in poisonous amounts produce a vaso-motor paroxysm with constriction of the arterial capillaries generally, but most marked in any organ that is constantly weak and overworked. He found *Mercurius* and its salts, especially the *Iodatus*, overcame this condition by rendering the blood unable to hold in solution the *Uric acid* and its salts, and the fact that a much smaller dose than that required for a chemical combination with *Uric acid* suggests the thought that the remedy really acts dynamically instead of chemically, and suggests a comparison between the remedy and the percussion cap that fires a gun but does not supply the motive power to the bullets.

Venom of the Toad and Salamander.—Dr. Hewlett, in the July issue of *Science and Progress*, shows that there is secreted by the skin of the toad a substance very similar to that of digitalin, and that the handling of a toad will sometimes produce disturbances of the heart similar to that found under the proving of *Digitalis*. The venom of the toad and salamander differs from that of snake poison, in that the former is a proteid, while that of the snake is an alkaloid. Both the toad and salamander seem to possess a remarkable immunity against vegetable poison, probably due to their sluggish circulation.

Medical Century.

Reflex Cough.—Dr. E. M. Hale, Chicago, reports two cases of obstinate cough which, failing to yield to the homeopathic remedies, upon a more careful examination were found to result from abnormal uterine conditions.

In one case a three months old dead fetus was found in the uterus. When this was removed the cough soon ceased.

In the other case, thought at first to be pertussis, there were malpositions of the uterus with vaginitis and cervical leucorrhea. These properly treated the cough disappeared.

In both these cases the cough was purely reflex and ceased when the producing cause was removed.

High Potency Cures.—Dr. S. R. Stone of Wisconsin reports a case of diarrhea in an infant six weeks old, with eight to eleven stools daily. Several remedies had been used without avail, when red sand was discovered on the diaper. *Lycopodium* c. m. cured in two days.

Dr. Stone also records a case of dyspepsia in a woman aged 38, with a feeling of a lump in the stomach, and who had never eaten pork or fats because she did not like them. "*Pulsatilla* cc and 10m cured her in a month.

Valuable Heart Remedies. Prof. T. C. Duncan, Chicago.—

Kola.—Kola was proved by students from the reliable nut furnished by my friend, Dr. Gatchell (not the editor of the Era, by the way). We found that it stimulated at first, but that was followed by depression and great muscular soreness. For that the general practitioner can use it, according to similia. (Compare Arnica.)

Crataegus.—Crataegus sends up the pulse and quickens the heart, but the reaction, the secondary effect, is to produce a weak heart with slow, full pulse—the range of Digitalis, neither so high nor so low. The mental effect is also more soothing. So it is homeopathic and curative for its secondary symptoms and must be given in small doses. I believe it my privilege and duty to tell as many of the profession as possible where and how to use these powerful new agents.

Strophanthus.—Strophanthus is a new drug, also, that deserves more attention. It acts on the heart entirely different. It produces primarily a shock, a slow pulse and intermittent heart beat, then follows a reaction. The pulse runs high and the heart is quickened. It is this kind of heart that craves stimulants, so that the brain may get the necessary flow. The pathology of this heart is dilatation. It has been found that seven drops of the tincture of Strophanthus would relieve the heart of an old toper and thereby cure the desire for stimulants. The small dose that will only manifest the secondary effects is the one to give if we desire to follow the guide of Similia. It is, there, "useful in weak, hypertrophied, irritable hearts, with tense arteries and a free discharge of urine."

Clinic Cities of Europe.—Dr. Geo. R. Southwick, Boston, mentions the following as the principal clinic cities of Europe, with especial advantages afforded by each:

Vienna for surgery, pathology, obstetrics, skin and venereal, bacteriology and physical diagnosis. Prague for the study of obstetrics. Berlin for operative gynecology. Leipsic for obstetrics, gynecology, surgery, bacteriology and cystoscopy. Heidelberg for its surgical clinics. Paris for obstetrics and gynecology.

The Arena.

Cancer can be Cured. Dr. E. O. Smith.—Two opinions have prevailed:

First.—Treat the cancer surgically, but that has failed.

Second.—There is a cancer diathesis arising from cancer germs in the blood, and remedies are capable of removing this condition.

Belladonna in Active Cerebral Congestion. Dr. J. Morton Kershaw.—The old school understand only the crude action of remedies, and give mainly anodynes and stimulants. They do not give remedies to render abnormal vital processes normal.

In the early stage of active cerebral congestion elevate the head, use cold compresses if the head is very hot, avoid stimulants and give belladonna and paralysis will be averted and a prompt cure effected.

CORRESPONDENCE.

October 29, 1897.

MY DEAR DR. SMYTHE:—I want to thank you for the September number of the DENVER JOURNAL, and to congratulate you on its style.

I am particularly pleased with the articles relative to Life Insurance and the A. I. H. Since reading the articles, I have carefully scanned our various journals, hoping to find editorial comment, or expression from other sources on these subjects. Beyond an editorial in the *Clinique* and one other, in which the A. I. H. article seemed to have been drawn from, I have seen nothing to indicate that they have received attention. I think this continued silence is a grave mistake, and want to thank you for coming out so boldly on both questions.

If the homeopathic profession ever succeed in breaking through the prejudices that practically bar its members from the position of examiners, it will be as the direct result of concerted action on their part. The American Institute has had its committee working for the past eight or nine years, with what results, the profession at large has been practically ignorant, and the large insurance companies apparently running in the old ruts, some of them employing here and there, in small places, a homeopathic examiner.

The report made by Dr. Strickler is so much to the point, and the correspondence with the N. Y. Life shows so definitely its irrational and arbitrary course, that it seems to me to be the plain duty of all of our journals to spread both. Can you not use your influence to this end?

Of "The Plea to Young Men, etc.," I can only say, "Them's my sentiments," and I am not as young as I once was, either. I, of course, did not know that matters had been so one-sided, but of the general proposition I have not been ignorant, nor has anyone else who is accustomed to attend the A. I. H. with his eyes open. The surprise to me is, that no one heretofore has been found who, knowing the conditions, was bold enough to come out fairly and squarely and show them to us as has Dr. Strickler, and yet perhaps it should not surprise us, because as with things as they are, it means a great sacrifice to any young man in the Institute to take such a stand against the powers that be. I seriously question whether the

other journals will make any note of this either, not because it is not a live question, but rather because each one will think it is too much alive to be safely handled by an aspiring editor.

Though not a sufferer from the present management, I am personally cognizant of a wide-spread feeling that the Institute is run by a favored few.

I hope the Institute may, at its next session, honor itself by electing a good live man from its younger men, and that it may, as the Doctor suggests, provide ways and means of caring for its new members.

Again let me congratulate the JOURNAL on its bold stand, and its fearless course in all matters affecting the general good of the school. *Long may she wave, and may her shadow never grow less.*

GOTHAM.

Chicago, Oct. 30, 1897.

DEAR DR SMYTHE:—As an old member of the Institute I would say that there is need of reforms along two lines.

First.—Make it more of a delegated representative body with more enthusiasm for homeopathy.

Second.—State or sectional representation on the working committees with more work for medicine and surgery.

Third.—Less boyish holiday jubilation mixed in where it does not belong.

One reason the attendance, payments, etc., have been less, is, as we all know, financial stringency.

The Omaha meeting should see a large attendance of western members, (and western physicians who should join) and if the young men do not go to the front and capture the offices and committees, they can blame no one but themselves. The Institute meets this year where there are few old men, so now for reform.

As Chairman of the Board of Censors I shall be pleased to carry to Omaha 100 applications for membership from each of the Mississippi Valley States. The Coast States should send 100, and the Southern and Atlantic States an equal number at least.

Let us have a grand rally with a solid delegation from each State.

Yours very truly,

T. C. DUNCAN, M. D.

WHY IS THIS?

Nevada only reports 3 homeopathic physicians. North Carolina only 6. South Carolina only 4. New Mexico only 9. North Dakota only 10 while new Oklahoma has 12. Are there not more good vacant towns in those wealthy States?

T. C. DUNCAN, M. D.

Subscribe for the Critique, \$1.00 Per Year.

MEDICAL JURISPRUDENCE.

X-Ray Photographs as Evidence.—This is a question of prime importance to physicians and surgeons, and *The Legal Adviser* will always give the latest authoritative judicial expression upon the subject. It will probably play a very important part in all mal-practice cases of the future. It has already become a live question in the trial courts of Colorado, but has not as yet reached our appellate courts. It is believed there is but one state—Tennessee—where it has been passed upon by a court of last resort. In the late case of *Bruce vs. Beall* (June 16, 1897, 41 S. W. Rep. 445) the question was presented for decision and directly decided. The plaintiff was employed by defendant, and while in the discharge of his duties was frightfully injured by the fall of a freight and passenger elevator in defendant's storehouse, occasioned by the wire cables breaking. The fractures he sustained were illustrated to the jury by a medical expert, who, over the general objection of defendant, exhibited certain X-ray photographs taken by himself. The court held there was no error in admitting such photographs in evidence, and disposed of the question in the following language:

"In the process of the trial, one Dr. Galtman was introduced as a witness, and he was permitted to submit to the jury an X-ray photograph taken by him, showing the overlapping bones of one of plaintiff's legs, at the point where it was broken by this fall. This was objected to by the defendant's counsel. This picture was taken by the witness, who was a physician and surgeon, not only familiar with fractures, but with the new and interesting process by which this particular impression was secured. He testified that this photograph accurately represented the condition of the leg at the point of the fracture in question, and, as a fact, that by the aid of X-rays he was enabled to see the broken and overlapping bones with his own eyes, exactly as if, stripped of the skin and tissues, they were uncovered to the sight. We might, if we so desired, rest our conclusions on the general character of the exceptions taken to this testimony, but we prefer to place it on the ground that, verified by this picture, it was altogether competent for the purpose for which it was offered. New as this process is, experiments made by scientific men, as shown by this record, have demonstrated its power to reveal to the natural eye the entire structure of the human body, and that its various parts can be photographed as its exterior surface has been and now is. And no sound reason was assigned at the bar why a civil court should not avail itself of this invention, when it was apparent that it would serve to throw light on the matter in controversy. Maps and diagrams of the locus in quo drawn by hand are often used to aid a judge or a jury to an intelligent conception of the matters to be determined, and no one would think of questioning the competency of the testimony of a witness who stated that he knew the map or diagram to be entirely accurate, and who then used it to illustrate or make plain his statement. The pictorial representation of the condition of the broken leg of the plaintiff gave to the jury a much more intelligent idea of that

particular injury than they would have obtained from any verbal description of it by a surgeon, even if he had used for the purpose the simplest terms of his art. We have not had our attention called to any case bearing on this question, save that of *Smith v. Grant*, tried in the First District Court of Colorado and reported in the *Chicago Legal News* of December, 1896; but photographs showing exterior surfaces have been admissible in numerous cases. They have been held competent on the question of identity of persons (*Udderzook v. Com.* 79 Pa. St. 340; *Cowley v. People*, 83 N. Y. 464; *Luke v. Calhoun Co.*, 52 Ala. 118; *Ruloff v. People*, 45 N. Y. 213), and to identify premises (*Church v. City of Milwaukee*, 31 Wis. 512; *Blair v. Pelham*, 118 Mass. 421), and in cases of handwriting (*Marcy v. Barnes*, 16 Gray, 161). It is not to be understood, however, that every photograph offered as taken by the cathode X-ray process would be admissible. Its competency, to be first determined by the trial judge, depends upon the science, skill, experience and intelligence of the party taking the picture and testifying with regard to it, and, lacking these important qualifications, it should not be admitted; and, again, even when it is not conclusive upon the triers of fact, it is to be weighed like other competent evidence."—
LEGAL ADVISER.

A COMPARISON.

In Brooklyn in three months of 1894, the allopaths treated one thousand and two hundred and ninety-seven cases of scarlet fever with one hundred and thirty-one deaths. During the same time the homeopaths treated one hundred and fifty-nine cases with nine deaths. At the same rate the homeopaths would have saved fifty-eight of the one hundred and thirty-one lost by the allopaths.. Does homeopathy cure or allopathy kill?

In St. Louis in 1891 the allopaths treated 813 cases of scarlet fever with 95 deaths. The homeopaths treated 138 cases with 5 deaths. At the same rate the homeopaths would have saved 64 of the 95 lost by the allopaths. Moral! Use homeopathy when you wish to live or save those dear to you.

In Detroit in 1891-2-4-5 the allopaths treated 1,411 cases of scarlet fever with 181 deaths; the homeopaths 279 cases with 16 deaths. At the same rate the homeobaths would have saved 100 of 181 lost by the allopaths. And yet we are told that old school medicine is scientific.

In Minneapolis in 1891-2-3 the allopaths treated 1711 cases of scarlet fever with 126 deaths; the homeopaths 546 cases with 14 deaths. At the same rate the homeopaths would have saved 84 of the 126 lost by the allopaths.

PERSONAL MENTION.

Dr. and Mrs. F. M. Tucker, of Lincoln, Nebraska, spent a few days in Denver on their wedding trip. The Doctor has a large and growing practice and the happy faculty of making friends. The CRITIQUE joins with others in congratulations.

Dr. A. C. Jones, recently of Colorado Springs, has located in Tucson, Arizona. The Doctor went to Arizona in search of health, and we are informed that he considers Tucson the ideal climate for weak lungs. The following from the *Arizona Weekly Citizen* will be of interest to Doctor Jones' many friends in Colorado and elsewhere:

"Dr. A. C. Jones returned last night from Phoenix where he went to take examination before the territorial board of medical examiners. There were five applicants who took examinations and Dr. Jones was the only one of the five who passed and received a certificate. He stated this morning that the examination was the most difficult of any he had ever taken, in fact much more rigid than necessary."

Dr. H. R. Arndt of San Diego, California, has written a work; A Handbook of Practice. It will issue early next year from the press of Boericke & Tafel.

Dr. D. E. Spoor, formerly of Denver, has returned from Schenectady, N. Y., his old home, where he has been spending the summer. He contemplates locating somewhere in Colorado.

Dr. W. D. Spoor, of the Denver College, class of '96, has located in Schenectady, N. Y. The 13th of October he was married to Miss Edith Bates of Lake George, N. Y., long known to the family.

Dr, S. F. Shannon has removed his office from the Masonic Building, 16th Street, to 711 17th Street.

 BOOK REVIEW.

Cutaneous Medicine: A Systematic Treatise on the Diseases of the Skin:—By Louis A. Duhring, M. D., Professor of Diseases of the Skin in the University of Pennsylvania; Author of "A Practical Treatise on Diseases of the Skin" and "Atlas of Skin Diseases." Part II, pages 223 to 429 embracing the subjects; Classification; Anemias; Hyperemias and a portion of Inflammations.

The author makes nine classes, as follows: 1. Anemias. 2. Congestions. 3. Inflammations. 4. Hemorrhages, 5. Hypertrophies. 6. Atrophies. 7. New Formations. 8. Anomalies of Secretions of the Glands. 9. Neurosis. This II part comes fully up to the standard of part I, in excellence, which is saying a good deal. When complete, this will be a comprehensive work reflecting the highest credit on the author. It is well arranged, well supplied with the best of illustrations, this part having over 70 full page plates, and in every way worthy of highest praise. It is sure to be well received by the profession. Published by J. B. Lippincott Co., Phila.

Practice of Medicine:—By James M. Anders, M. D., Ph. D., LL. D., Professor of the Practice of Medicine and of Clinical Medicine in the Medico-Chirurgical College, Philadelphia; Attending Physician to the Medico-Chirurgical and Sanitarium Hospitals, Philadelphia, etc.

This is an up-to-date work of the regular school, systematic and concise and yet sufficiently complete for the ordinary practitioner. Some features of the work are to be especially commended. The tables in aid of differential diagnosis afford a valuable help to the diagnostician, and in the main are original with the author. We are pleased to note, also, that preference has been given to the modern orthography and terminology, not only because it is more euphonic but also because of its adoption by the standard lexicographers". The work has 1287 pages and is from the press of W. B. Saunders, Philadelphia, which is a guarantee of its excellence in general make-up.

An Epitome of the History of Medicine.—By Roswell Park, A. M., M. D., Professor of Surgery in the Medical Department of the University Buffalo, etc. Illustrated with portraits and other engravings. One volume, Royal Octavo, pages XIV-348. Extra cloth. Beveled edges, \$2.00 net. The F. A. Davis Co., Publishers, 1914 and 1916 Cherry St., Philadelphia; 117 W. 42nd St., New York; 9 Lakeside Building, Chicago.

This volume is based upon a course of lectures delivered in the University of Buffalo, and is an effort to bring the most important facts and events of the history of medicine within the scope of a medical curriculum. The subject matter is divided into fourteen chapters, the first being the history of medicine among the ancient Hebrews, the Egyptians, the Orientals and the Chinese, down to the time of Hippocrates, following Renouard's classification. Ending in the eleventh, twelfth and thirteenth chapters with a "History of Medicine in America," "The History of Anaesthesia" and "The History of Antisepsis," respectively. The fourteenth and last chapter deals with the History of Dentistry, "in which America leads the world." There are 56 illustrations illustrating principally instruments used at different periods, and portraits of men prominent in medicine.

The book is well written, printed on good paper, in type easily read. It is just what it claims to be—an epitome of medicine. He says little of Homeopathy. Ascribes its use as a natural reaction against the heroic measures in vogue at the time of Hahnemann, and calls it "practical therapeutic nihilism." Into the life and labors of Hahnemann he does not go at all. This is probably for the best, as we could not expect a very fair estimate of either from a practitioner of old school medicine. The work is up to date and should be in the library of physicians who want a relatively small work giving the facts in the history of medicine.—D. A. S.

Subscribe for the Critique, \$1.00 Per Year.

PUBLISHERS NOTES.

Fancy leather goods of any description made or repaired by Louis A. Becker, 96 Opera House Block, Denver.

You can procure from Taylor & Myers Pharmacy Co., of St Paul, any thing manufactured by a homeopathic pharmacy, at reasonable rates-

Campho-Phenique powder as a dry dressing in all kinds of superficial wounds, burns, chancroids and cases of minor surgery, will aid union by first intention; and is an antiseptic devoid of the harmful and poisonous effects of bi-chloride of mercury. A. W. J., M. D.

Maltine Plain is a nutrient par excellent that the most delicate stomachs can retain and assimilate. Why not cater to the patients taste, as well as the disease. The same pleasing results have been obtained with Maltine with Cascara. They act. A. W. J., M. D.

HYDROZONE,

For Disorders of the Genito-Urinary Tract.

Dr. John Aulde; of Philadelphia, (*Medical Times and Register of Philadelphia, Pa.*, Dec. 5, 1896), states that about eight years ago he was forcibly impressed with the value of Peroxide of Hydrogen in a protracted case of gonorrhoea. The disease had persisted for three months despite the treatment of several attendants, there being a constant discharge and in addition, there was an orchitis present, the left testicle being about as large as a base-ball. Treatment consisted of the local use of injections of equal parts of Peroxide of Hydrogen and moderately warm water, used at intervals of four hours, these injections being followed by a solution of arsenite of copper containing one miligram (one 65th grain) to the drachm, diluted with an equal quantity of hot water. In a week the patient was able to return to his home in a distant State, the discharge from the urethra having entirely ceased, and pain and chordee having disappeared. The author advises the same treatment for non-specific urethritis and gleet, but as Hydrozone is much stronger (2 times) than the Peroxide, and perfectly harmless, he gives it the preference. In vaginitis and vaginismus this treatment is of especial value. The treatment heretofore recommended by physicians, consisting of hot vaginal douches, either with or without some alkali, as sodium bi-carbonate, followed by the injection of a small quantity of Peroxide of Hydrogen (medicinal) in warm or cold water is superseded by the single application of a hot solution of Hydrozone, one part in eight; the patient should use a fountain syringe which should be hung upon the wall about six feet from the floor the patient sit upon a suitable vessel, and introduces the rubber tip of the hose well back into the vagina, while the labia are compressed by the disengaged hand; this allows the solution to so distend the vagina as to bring it in contact with all the diseased tissue. The injection should be repeated twice in twenty-four hours.

Messrs John Carle & Son, New York City.

Gentlemen—I have recently used the Imperial Granum with very gratifying results, being called in consultation, when death seemed imminent, to see a *child that could retain nothing whatever on its stomach*. I remembered my samples of Imperial Granum and ordered it tried at once, and *it was retained*. The child has not vomited since, the bowels are quiet, and the patient on the road to recovery. I have also recently used the Imperial Granum in a case of typhoid fever with equally satisfactory results.

Yours very truly, ——— M. D.

A gentleman consulted a quack doctor who advertised to cure all nervous troubles. After trying him for six months, he says, that instead of a nerve apcialist he found him to be a "skin doctor."

A patient sent for us the other day and when we arrived he stated that he fell on Clark Street and broke his leg just above the opium "joint."

Doctor—"You want some strengthening medicine, sir."

Mr. Mulligan (emphatically)—"Oi do that, doctor. Shure my woife is much stronger than Oi am an' she bates me on-mercifully.

"So one physician like a sculler plies,
The patient lingers and by inches dies;
But two physicians, like a pair of oars,
Waft him more swiftly to the Stygian shores."

A Michigan lady gave her son 5 grains of mercury. Later developments proved that it was a chilly day for the boy when the mercury went down.

FOR SWEARERS.

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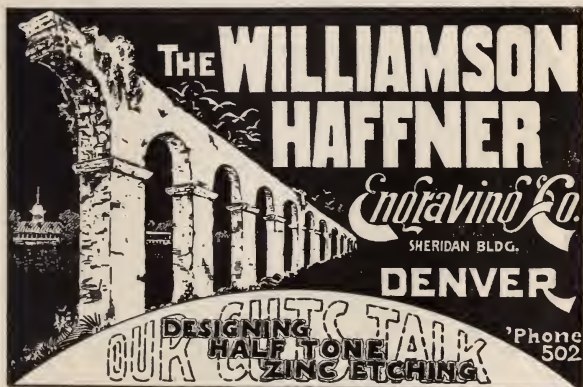
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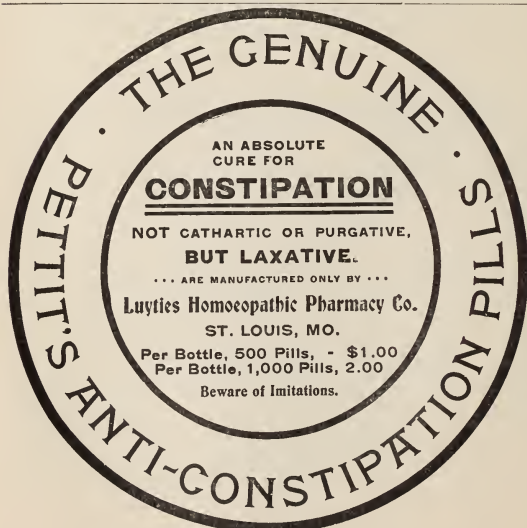
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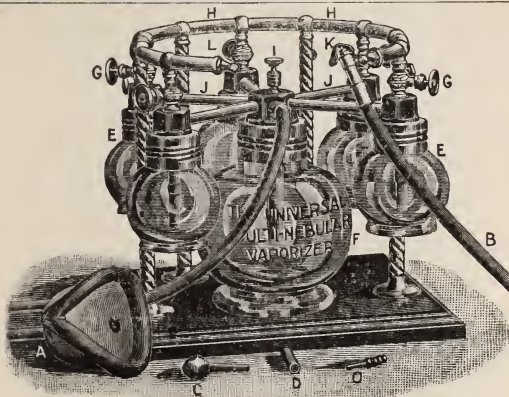
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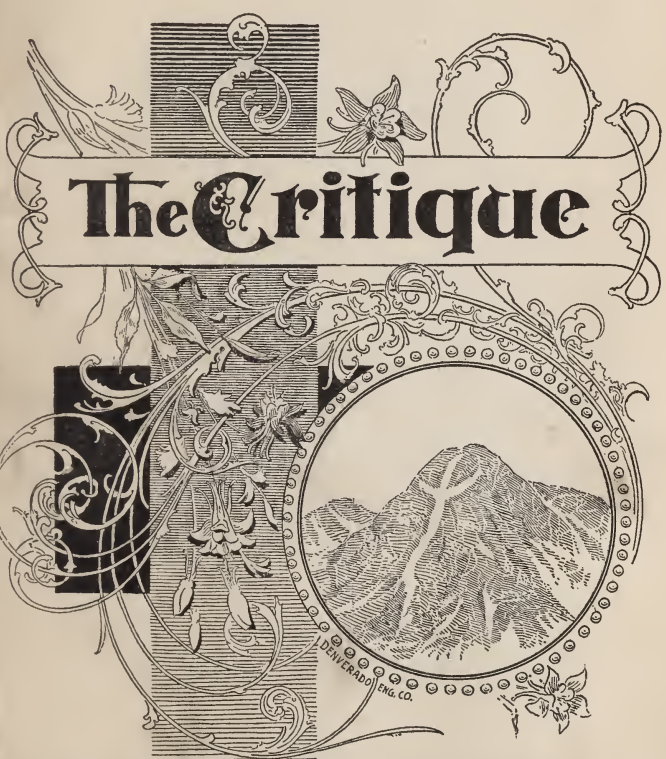
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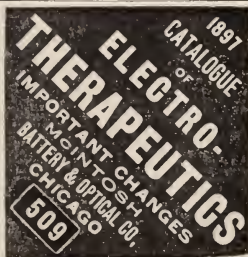
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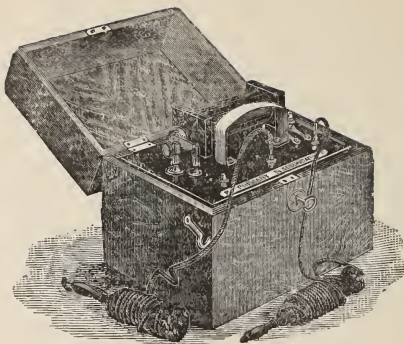
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THE CRITIQUE.

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VOL. IV.

DENVER, COLO., DECEMBER 15, 1897.

No. 3.

VIVISECTION.

[NOTE.—On November 27th ultimo, the Woman's Club of Denver invited a discussion "On Vivisection" in the public schools and elsewhere. Several allopathic physicians spoke in favor of it, and the negative was championed by Drs. W. A. Burr and J. W. Harris of the homeopathic profession. There was a large attendance and the sentiment of the people was clearly in sympathy with the negative side of the question. We give the following interesting excerpts from the speeches.]

DR. W. A. BURR.

Vivisection is uncertain in its results.

Animals are unlike men. Many poisonous drugs effect men and the lower animals very differently, and vivisectors often come to wrong conclusions. The result is man has to pay the penalty. Antimony is harmless to horses; dogs are not injured by mercury, and mice may take hemlock with impunity. Some animals are not affected by belladonna, and pigeons may take large amounts of opium with safety. Drugs injected into the veins of animals produce very different results in different species. M. Longet says: "Experiments on animals of different species, so far from tending to useful results, have a tendency to mislead us." The noted Dr. Sternberg asks: "What definite results should we expect from the poisoning of animals under abnormal conditions?" Experimenters often come to very different conclusions. Mental emotions, especially fear, have a most potent influence in changing results.

The renowned Pasteur and others have vivisected great numbers of dogs to learn how to prevent and cure hydrophobia, and yet a Paris physician says: "Pasteur does not cure hydrophobia; he gives it." Another doctor says: "I have a list of names and addresses of 263 persons who have died of hydrophobia after undergoing Pasteur's alleged preservative; and

moreover, wherever an institute has been erected, the disease of hydrophobia has increased in dogs and men." Dr. William A. Hammond, ex-U. S. Surgeon General; Dr. E. C. Spitzka, and many other physicians of note all over the country, are opposed to Pasteur's treatment of hydrophobia. Pasteur himself acknowledged that 85 or more per cent. of all who seek treatment for hydrophobia are in no danger of it. It is a very rare affection. Among 350,000 dogs disposed of in two Eastern cities, it is said not a mad dog was found. Dr. F. S. Arnold, England, says: "I believe the whole method of experimenting on animals is, scientifically speaking, absolutely uncertain and untrustworthy."

Dr. Wm. Rutherford acknowledged that pathological experiments must afterwards be tried on a man before a correct conclusion could be drawn. Sir Chas. Bell says: "The opening of animals has done more to perpetuate error than to confirm the first views taken from the study of anatomy." And so the testimony continues. There is almost no end to it, and it comes from reliable men of wide learning.

In regard to Dr. Koch's treatment for tuberculosis a writer says "So dangerous is Koch's inoculation now known to be that in Germany a law has been passed forbidding the use of his celebrated prophylactic." Many physicians, apparently a majority, concede the failure of the Koch treatment for tuberculosis. A monument to this failure may be seen standing in the suburbs of our own city. Dr. A. Leffingwell says: "The very diseases for the investigation of which scientists have vivisected for the last half a century have been, during that time, steadily on the increase."

Vivisection is comparatively useless; nearly all important researches and experimentations in science may be carried on without it.

There is good reason to believe that Wm. Harvey did not discern the circulation of the blood through vivisection. He "reasoned out the truth of the circulation from the position, attachment and arrangement of the valves of the veins found in the human body after death." Several authors share this belief.

Dr. Jenner himself declares that vaccination was discovered without a single experiment on a single animal.

Sir Lawson Tait, a world renowned surgeon, says: "No further success was achieved in abdominal surgery from 1701 to 1809, practitioners being led astray by vivisection." To him also was awarded the prize for the greatest benefit done to practical surgery from June, 1887, to June, 1890.

Dr. A. de Noe Walker said; "The knowledge of the healthy function of animal life does not contain in itself any therapeutic agents for the treatment of any disease by which those parts may be affected."

Dr. John Fletcher, of Edinburg Medical School, said: "During many years' experience in lecturing (on physiology) * * * I have never found it necessary in a single instance to expose a suffering animal for the purpose of elucidating any point in physiology. None of the functions of animals need to be seen in action in order to be perfectly understood."

The famous Abernethy, himself not favorable to vivisection, in his knowledge of the digestive functions stood at the head of his profession.

By means of pathological observations, anatomy, chemistry, the microscope and post-mortem examinations, and the many other helps possible to experts in laboratory work, researches and investigations in physiology or any other department of medical science need not materially suffer without vivisection. Very prominent among these is anatomy, As has been said: "It is not the motion of machinery that explains the mechanism, but the mechanism that explains the motion."

The practice of vivisection tends to demoralize all who practice or witness it. If the physician becomes hardened and unsympathetic, his patients must suffer because of that degradation. The higher his estimate of human life, the greater his effort to preserve it. The degree of civilization of nations is determined by the value they place upon human life. We can not be too careful that the physicians and surgeons who literally hold human lives in their hands, possess kind and philanthropic spirits. The contaminating influences of vivisection not only extend to medical students, and to society in general, but are also conveyed to posterity. Because man was given

"dominion over the fish of the sea, and the fowl of the air and every living thing that moveth upon the earth," does not give him the right to be cruel and cause unnecessary pain. Animals have rights which enlightened people must respect. So many are the influences which tend to make physicians and surgeons unkind and unsympathetic that they should, as far as possible, foster the opposite natures.

The spirit of kindness toward the lower animals is a virtue in any man. Pity for suffering animals is not generally different from pity for suffering man. "A righteous man regardeth the life of his beast."

In the savage state man is cruel even to his own kin. As he advances in civilization he becomes more and more considerate of the feelings and rights of others. When enlightened he has sympathy and love for the whole human race. When he ascends to the higher planes of human enlightenment, his feelings of justice and sympathy extend to the animal creation also. Vivisection measurably puts a check to progress in the refinements and humanities of life.

DR. J. W. HARRIS.

First, what is vivisection? It is the cutting up of live animals; also poisoning, burning, smothering, freezing, breaking the bones, irritating the bared nerves, dissecting out the stomach and other organs, dropping them from great height upon corrugated surfaces (to see if it hurts), opening a blood vessel, inserting a tube and applying hydraulic pressure to see how much they can stand without killing them; feeding them upon putrid lungs of human beings, the different forms of inoculating a poison into the system in order to produce another poison to give a man, that he may also die in a scientific way—for you know that we come under the head of living animals, and we are not exempt from some of these methods, neither do you know when your turn may come. Although, when the human animal is used it is done entirely on the quiet, yet should it go on in this way much longer it will not be long before they will be used openly, as in Nero's time, when Herophilus alone vivisectioned 700 human subjects. Some of you may not know that but a short time ago a very persistent attempt was made, al-

though quietly, and most of the legislating done by the doctors for the dear public is done quietly, to get a bill through the Ohio legislature turning criminals condemned to death over to vivisectors to be used in experimentation. In fact, vivisection means any form of torture called experimentation that can be invented by the mind of man.

2nd. Is it much practiced? It is very much practiced, although vivisectors and the institutions in which it is carried on try in every way possible to keep it from the public. A guilty conscience needs no accuser. (To use the words of Dr. Leffingwell: "No feudal castle of the middle ages was ever more rigidly guarded against the entrance of an enemy, than physiological laboratories are secured against the admission of unwelcome visitors. It is practiced in secret like the crime that it is.")

There is scarcely a medical college in the land where it is not practiced. There is scarcely a university that does not have its torture room, called its physiological laboratory. At most of veterinary colleges it is practiced in a wholesale manner. It has crept to a very great extent into our public schools, and even into our Y. M. C. A's., an example of which we had but a short time ago in our own city. And in this country it is practiced nothing in comparison to the European countries, except England, where it is restricted by law. At Lyons, France, Prof. Schiff, in ten years, vivisected 70,000 animals. In many other large cities of the Continent, it is practiced on as great a scale. Paris alone has 1000 vivisection laboratories. Vienna and Berlin are not far behind, hence I am right in saying it is very much practiced.

3rd. What are some of the methods used? I do not think it is necessary before an audience like this to make an emotional plea in behalf of the sufferings of the lower animals. I am sure that I am talking to people who know well the meaning of pity and sympathy, and can feel for the sufferings even of the lower animals, therefore all I need to do is to state to you a few of the plain facts, and let you draw your own conclusions as to cruelties, etc. Notwithstanding the statements of some of the vivisectors to the contrary, most of the experiments are made without the use of an anesthetic, and many who begin with its use

soon become so hardened, that they do not see the need of it. One vivisector dropped 50 dogs from a great height upon a corrugated surface to see the effect of the concussion upon the spinal cord, and with what good to humanity. Others bake animals alive to see how many degrees of heat it takes to kill them. Again they are starved to death to see how long they can go without food and drink—and for what? A brain is laid bare, certain part^s burned away with a white hot iron to see the effect on the nervous system. A certain number of the principal nerves are dissected out, and electricity applied to see the effect of the stimulation. At the different institutes over the land, hundreds of animals are inoculated with the virus of rabies and other diseases, and go through all the horrible sufferings of the different stages of these diseases—and for why? I will tell you shortly. I wish you to bear in mind that many of these experiments extend over a period of days and months. Go into the operating room of a veterinary college in most any of our larger cities and what will you see? Eight young men of a class will be put to work operating upon a live horse that has been so bound that he cannot move or resist in any way. One will be told to drive a seton through the shoulder, another through the flank, another to dissect the muscles of the face, removing the eye, another to tear off a hoof, another to dissect out the nerves of the foot, another to divide the tendons of the legs, another to perform tracheotomy, and those eight young men will operate on that horse from six to eight hours, performing in all 100 to 150 different operations, and if he is alive at the end of that time, that suffering, mangled beast is left in all his misery till the next day, that another class may continue their fiendish work till death comes to relieve him of his sufferings. And all this has been done without an anesthetic, and nothing has been taught, unless it be devilishness, that could not have been in another way involving no pain. One more instance, and I will give it in the words of one of our most noted vivisectors, Sir Chas. Bell, the discoverer of the functions of the anterior and posterior roots of the spinal nerves. He says: "I recall to mind a poor dog, the roots of whose vertebral nerves Magendie desired to lay bare to demonstrate the theory I claimed as my own. The dog, mutilated and bleeding, twice escaped from under the

implacable knife, and threw its front paws around Magendie, licking as if to soften his murderer, and ask for mercy. I confess I was unable to endure that heart-rending spectacle," and writing to his brother he says: "You may think me silly, but I cannot perfectly convince myself that I am authorized in nature or religion to do these cruelties."

Is it any wonder then that the late Henry Bergh says that this unfits the physician for the intimate and tender relations of friend and adviser, and makes him hence more to be dreaded than disease itself.

4th. What good comes from vivisection? I know that the vivisectors claim that all the important discoveries in physiology and many in therapeutics have been made through vivisection. Some of the discoveries they claim are the circulation of the blood by Harvey, vaccination by Jenner, chemistry of digestion by Schmidt and Bidder, causes of fever and inflammation by Claude Bernard, advance in surgery, particularly abdominal, the discoveries of Koch, Brown Sequard, Pasteur, Kleb, Loeffler, and many others, But let us review these for a moment. We have Harvey's written testimony that the discovery of the circulation of the blood was due to anatomical observation and examination and study of the construction of veins and arteries, and not in the least to vivisection.

Jenner says that the discovery of vaccination was made without a single experiment upon a living animal. Chemistry of digestion was thoroughly studied on a man by the name of Mason, who by accident had an opening made through the walls of the stomach and abdomen, and remained open after healing.

Claude Bernard says notwithstanding the great amount of vivisection being done, our hands are still empty. Bell says the discovery of the functions of the anterior and posterior spinal nerves was made entirely by anatomical study, furthermore vivisection has done more to perpetuate error, than to confirm the just views taken from the study of anatomy. Magendie, to prove the same thing as Bell, vivisected 4000 dogs, then vivisected 4000 more to prove it was not true.

Tait, the greatest abdominal surgeon of the day, says: "Experiments on animals did and could teach nothing, for oper-

ations have been performed on thousands of animals every year for centuries, and nothing whatever has been learned from this wholesale vivisection." Again he says: "Like every member of my profession, I was brought up in the belief that by vivisection had been obtained almost every important fact in physiology, and that many of our most valuable means for saving life and diminishing suffering had resulted from experiments on the lower animals. I know that nothing of the sort is true, and I do not believe that vivisection has helped the surgeon one bit, but I know that it has often led him astray."

And now I come to the greatest claim of them all, Serum Theraphy, and it is the foundation upon which the vivisectionists are standing to-day, yet it is a foundation built upon the sand, and shifting sand at that.

You all remember when the news flashed around the world of Koch's discovery of a new and sure cure for consumption, the medical profession actually lost their heads, and the laity too. Hospitals sprung up all over the land, wherein his treatment could be followed out. Some of our own doctors made a hasty pilgrimage to Berlin to obtain some of that life giving serum, yet to-day Koch's treatment is something of the past. The mortality rate in consumption is as great to day as ever, and the only ones who reaped any benefit were those who manufactured and traded in the serum. About the same time came Brown-Sequard's elixir of life, which made him the laughing stock of not only the medical profession, but also the entire world. Then came Pasteur's treatment for hydrophia. Let me tell you that hydrophia is a very rare disease outside of the physioligical labratory. Out of 350,000 dogs impounded in Brooklyn and Jersey City, not a single case was observed. In France, 1896, two genuine cases were observed, outside of Pasteur's Institute, yet up to the year 1894, 300 of Pasteuare's patients had died of hydrophia. Where did they get it? 40 deaths had been traced directly to the injections; hence is it surprising that Phillip Searles of Paris asserts that there is a steady growing feeling against Pasteurism on the part of medical men in France? Dr. Lutaud declares Pasteur does not cure hydrophobia, but gives it, and where ever an institute has been erected the disease has greatly increased both in dogs and men.

Dr. Dolan says that so far from lessening the sum of human misery, Pasteur has increased it, while Dr. Chas. Bell Taylor of England describes it as the most extraordinary delusion which has afflicted men of science for years. The opinion of such men as these is worth something, and it will be but a short time before Pasteur's treatment will be placed along side of Koch's and Brown-Sequard's.

The Antitoxine treatment for Diphtheria is the latest medical fad. I am beginning to believe that many of these serum doctors are the biggest fad hunters on the face of the earth. There is a sentiment springing up all over the land against anti-toxine; it kills too many upon whom it is used as a preventive, and, manipulate statistics as they may, you know they say there are three kinds of lies—the white lie, the black lie, and statistics—but let them manipulate them as they may, they are able to prove but one thing, and that is anti-toxine is a benefit only to those who trade in it, and that financially. Death has followed in its wake without one solitary case of undisputed cure. Give it a little time and it will be laid upon the shelf. I notice all around me that the doctors are already looking for another fad to spring upon the people.

I come now to the fifth and last question. What harm comes from vivisection? You all know that we each have three different distinct natures; the physical, mental and moral. Take a certain number of people, examine them, and you will find certain ones below the normal, physically, again some of them will be below the normal, mentally, and again some below the normal, morally. The latter are known as Psychopaths a term which denotes an inborn aptitude to immoral actions in any direction. This aptitude may not always be awakened; doubtless in many cases, by the proper education and environment it is outgrown, but if it once be fairly aroused, so that there is much gratification in wrong doing, there are no excesses of cruelty and crime to which these psychopathic people, these moral imbeciles, may not go, and strange enough, it is very often in the direction of cruelty, the infliction of pain, that the first incitement is directed. Hence there is no doubt but that among those who perform vivisection, or those who witness it, to some there will come, slowly creeping unto consciousness, a

vague, abnormal, horrible sense of satisfaction at the sight of this quivering flesh, and within them will have been aroused a sensation oftentimes the mother of every cruelty, for out of this sensation is born the instinct of murder, and the lowest tendencies of viciousness and crime. In 1891 John Conway was hung in Liverpool for the murder of a little boy, and his confession read "I was impelled to that crime by a morbid curiosity to observe the process of dying. A Canadian physician was executed in London, 1892, for the murder of a number of young women, merely, that in the contemplation of their suffering he might find pleasure and excitement. Holmes the arch fiend and multi murderer who paid the penalty of his crimes with his own life at Philadelphia, was a vivisectionist. Jackson, the murderer of Pearl Bryan near Cincinnati, was a vivisectionist. Theodore Durant of San Francisco, who is now waiting to pay the penalty of his double murder was a vivisectionist. Is it then in vivisection that you wish your children educated, is it in vivisection that you wish your neighbors children schooled. As you sow, so shall you reap, and if we continue to sow broadcast over the land vivisection, we will each year reap a greater harvest of murders.

BURNS AND MORPHINE.

By A. C. Stewart, M. D. Durango, Colo.

Who among us has not observed, sometimes with dismay, the effects of reflex disturbance, yet it is seldom that we are permitted to look upon the actual progress of molecular destruction from this cause alone. I think it may be said that burns, even simple or first degree lesions have taught us many valuable lessons in reflex and I have come to regard a burn, no matter how slight, as capable of making a great deal of trouble and I never leave the bedside after having dressed a burn without finding some indication for a dose or two of internal medicine and if I do not find clear indications, I leave a little belladonna to cover possible cerebral excitement later on, and it is usually required.

I have had two cases within the last few weeks, the one mild and the other severe, and both illustrating the point in

question. The one, a woman of twenty-five of unusually robust and well-balanced constitution. Burn, simple—facial, no mucous surfaces involved—hot water, exposure short, treatment usual— heavy calendulated oil— no ulceration, prompt healing and no scars. Appetite continuous. Functions of the body generally, natural. Reflex: All of the second day devoted to hard chills and attacks of what she called “burning up” with thirst. She sent for me in the evening (I had not called again after dressing the burn as I did not consider it necessary) I found no indications as a “key” for my remedies except those stated, until the question of the urine arose when, it having been suppressed since the night before, gave me the desired information and of course a few doses of arsenicum restored her health. Just one more, of the more serious type:

Girl, age 6, fell into a bed of “live coals” her burns were 3rd degree, hands and wrists. Nature amputated three of the fingers and she recovered with the total loss of but one, the flexion being rigid and complete—I may amputate that, but I want to tell you of the reflex here; On the dorsum of the foot over the extensor tendons of the great and second toes the flesh was eaten away as cleanly as though burned with actual cautery, to the size of a dollar—not so wide but a little longer, exposing the tendons; this happened during the night following the accident. There was no pain and it was only discovered by accident. I at first thought it had been burned, *but it was not a burn*. The foot had not been near a fire. The shoe and stocking were intact. The wound healed in a few days. Now let me say a few words about morphia in burns. Of course it would seem altogether unnecessary to warn members of the physiological school of medicine against the promiscuous use of morphia chloroform quinine &c., in handling their cases, yet, in my opinion there is altogether too much of it used to the very serious detriment of many systems, even in our school, thereby increasing rather than decreasing the physician’s responsibilities and this is particularly emphasized in burns (second or third degree more particularly) I have not found occasion to use it for some years in these cases, in fact, rarely if ever use it for any purpose. To me it seems a most unnatural agent *where death can be prevented*—unnatural where the physician

familiar with the natural weapons with which to meet dangerous conditions. Pain is comparatively slight in deep burns—not sufficient to justify the dangers of its use, the proportion of pain to the depth of the burn is inverse but the secondary manifestations are prompt and proportionate. The tendency of disease is to recovery and not to death and this is due to inherent dynamic resistance, as natural to the creature as his desire for food, but these forces although powerful within themselves and keenly on the alert—a sentinel faithfully guarding the fortress of health—one that never sleeps on the post of duty and whose eye constantly sweeps the economy from the phagocytes to the ducts of the parotids—dare not at the moment when the greatest, the grandest work of God is being performed, pass under the paralyzing influence of narcotic alkaloids.

We have only to look about us for numerous instances of the abuse of cases by the injudicious use of this narcotic and I do not refer alone to the awful and increasing list of addictions from its hypodermic use for simple bellyache, headache, toothache, &c., (where a single dose of the indicated remedy would promptly and harmlessly cure) but I point to the list of deaths outright that can be readily traced to this cause and the young doctor whose fledgeling face is so commonly seen in so-called medical monthly publications at the price of one subscription are not alone the chaps who are swelling the list of dead.

Having been brought up in the Old School I know the tendency to make this deadly and almost useless drug stand between the doctor and further trouble and worry—know it only too well but the sacredness of our calling should not be forgotten.... Only a few days ago a victim of a slight burn (below the knees, to the second degree) passed away, from the morphine and whiskey treatment here, (alvine rupture.)

Six months ago I was called to treat a child suffering from a scald, second and third degree, involving neck, chest, belly, side, (complete) right arm, thigh, (complete,) to two inches below the knee. Medical literature would say this child died. She recovered perfectly, although nearly dying from exhaustion, but she had no morphine—nor was her suffering very great at any time after the first two or three hours. She walked in a month.

Gentlemen, as physiological physicians, *we do not need morphia*. When our patients die, let us be sure they die from *natural causes*.

THE FUTURE OF THE AMERICAN INSTITUTE OF HOMEOPATHY.

November 20, 1897.

TO THE CRITIQUE.

My article in your September issue entitled "A Plea for the Young Men in the A. I. H." has called forth many letters of congratulatory nature, some of them very strongly endorsing my position; it called out some favorable editorial comments, and one editorial, in the nature of a criticism, from the pen of Dr. Porter, the efficient secretary of the A. I. H., and editor of the *North American Journal of Homeopathy*. A criticism coming from such a source should naturally be looked upon with much interest and credulity. As the Secretary designates the statistics given by me as "very ingenious but not quite convincing," I beg space of you to say a few words about them as well as those he furnishes, to refute them. He tells us that a careful study of Institute records shows that from 1885 to 1890 inclusive, the average attendance of the Institute meetings was 185. From 1891 to 1897 inclusive, the average attendance has been 432.

From 1885 to 1890 inclusive, the average number of new members yearly was 82. From 1891 to 1897 inclusive, the average number has been 157. The attendance at the 1885 meeting was 114. The attendance since the Denver meeting has not diminished. Newport had 322, Detroit 301, Buffalo 330. From the fact "that for the last seven years the average attendance has more than equalled one-fourth of the membership, it would seem that Dr. Strickler's second point" (that the attendance is diminishing) "is not well taken." Now let us figure a little further and see how Dr. Porter's point stands. In making up my case I used only the books on hand, namely those from 1889 to date. If it is right that Dr. Porter should compare the period from 1891 to 1897 inclusive, to that of 1885 to 1890, inclusive, then it must be right to compare the first

three years of the former period or that from 1891 to 1893 inclusive, to that of 1895 to 1897 inclusive.

In making this comparison I find that the average attendance for the first period was 605 while that of the last period was 318. The per cent of members attending from 1891 to 1893 inclusive, was 43.5, and from 1895 to 1897 inclusive was 19.6. The average of new members in the former period was 188, in the latter 133. Is this or is it not a decrease?

The writer did not make this comparison in his article because he did not consider it fair but since Dr. Porter thinks it fair to use the period as a whole, he certainly can not object to a fair division of it. What would be a more nearly fair comparison is to take the period from 1888 to 1890 inclusive, and compare it to 1895-6-7. I take this because the meeting of 1885 was held at St Louis, a way off from homeopathic medical centers, and is not a fair criterion, while the last three meetings have been held in the centers of good homeopathic fields. Comparing these two periods, then, we find in the first an average attendance of 30.7% of its membership, in the second period an average attendance of 19.65% of the membership.

The doctors selection of times in the history of the Institute is not fair because in 1885 the Institute met in St Louis under the conditions before stated and had a very small attendance, again in 1889 it met up in Minnesota, away from homeopathic physicians. In contradistinction to this he selects a period commencing with the International Hom. Congress, attended by more than double the number attending any previous Institute meeting, and includes the Worlds Congress at Chicago with 896 members in attendance. If such tricks are necessary to prove his point I am surely content that he and not I should use them.

On my first point, viz.; that the Institute is a government by the Seniors." He accredits me with the following: "He says that from 1892 to 1896 inclusive, 721 new members were admitted, of whom 365 have attended. 306 of these or 84 per cent have never been assigned any duties in the Institute. He also states that 129 Seniors, attended the same years who filled 271 appointments. He also mentions the fact that in 1894 one Senior was on seven committees, and another on six. Dr.

Strickler's statistics are ingenious but not quite convincing. Let us make a broader and therefore a fairer comparison. In the three years beginning with 1895, of the 27 chairmans of sections appointed, 13 were members of more than ten years standing, and 14 were members of ten years standing or less; of the members of sections appointed during this same period 214 were members of more than ten years standing, 221 were members of ten years standing or less." My figures were based on all of the appointments to all positions in the Institute, *committees and sections*, but the Doctor, to make it "broader and therefore fairer," proceeds to limit his figures to the appointments on sections, and thus we learn that a part is broader and fairer than the whole. If this be true of the sections it must be true of the committees, and so far as the *government* of the Institute, the point at issue, is concerned, it is certainly more true of the committees than of the sections, but before taking this up let us see what his figures show. He tells us that 214 of the appointments were members of more than ten years standing and 221 of ten years or less, but he does not tell us that the 214 were selected from 450 members, while the 221 newer members were from 1204 members, in the one case 47.5 per cent. represented, in the other 18.3 per cent. Had he broadened (?) the comparison by limiting it to the committees he would have told you that in the same three years the Seniors held 126 appointments to 12 held by members of 5 years or less standing, but his object evidently was "ingenious statistics" in opposition to facts that are too widely recognized to admit of successful refutation.

I have no desire to oppose any man or body of men, but the whole of the Institute is greater than any of its parts, and the younger and newer members must be recognized and set to work, if the Institute is to be the power in the medical world that it should be.

He credits Dudley with more appointments of young men to chairmanships than either Fisher or Custis. Here again he uses only the sectional appointments. Dudley appointed on committees, three members of 5 years or less, while Fisher appointed 12, each appointing more Seniors on committees than were present at the session over which he presided. As the pol-

icy and government of the Institute are largely in the hands of its committees, and as these committees are dominated by the Seniors, I see no inconsistency in the claims of those younger members who feel that the Institute is a government of the Seniors, etc.

The question at issue, viz., that the younger and newer members are ignored and the Seniors are given undue prominence in the government of the Institute, cannot be clouded by the Secretary's presentation of one side of it, and that side the one which has the least to do with it.

DAVID A. STRICKLER, M. D.

RESOLUTIONS ADOPTED BY STUDENTS OF THE DENVER HOMOEOPATHIC MEDICAL COLLEGE.

Denver, Colorado, November 4, 1897.

WHEREAS, It has pleased the allwise Creator in his infinite wisdom to remove from our midst our worthy and highly esteemed professor, Dr. C. E. Tennant, Sr., one whose conscience was his supreme guide, who met all the responsibilities of life with exactness and courage, one who was comprehensive and able and recognized no obstacles insurmountable that stood in the way of the discharge of his duties, public or private. He was loyal to his friendships, and in his profession he was frankness personified.

RESOLVED, That by his death we lose a great and good man, a valued friend and instructor, and our college one of its staunchest supporters, one who was ever ready to discharge a duty; and be it further

RESOLVED, That we extend to the bereaved family our sincere sympathy; further

RESOLVED, That a copy of these resolutions be sent to the daily papers, THE CRITIQUE, and a copy be tendered the bereaved family.

H. M. Morton

W. S. Connett

W. H. Twining

Wm. A. Woodworth.

MATERIA MEDICA DEPARTMENT.

Conducted By Clinton Enos, M. D., Professor of Materia Medica in the Denver Homeopathic Medical College and Hospital.

AURUM METALLICUM—Notes from a Lecture

The mental symptoms of this remedy are the most important, to understand its nature. There is great depression of spirits, hopelessness, melancholy. He looks on the dark side, thinks he is not fit to live and longs for death. There is strong inclination to commit suicide. He is all the time in a dark, hopeless mood, with anxiety and despair; life is a burden to him. He wants to be in a cool place for most of his sufferings. In periosteal and bone pains, he is sometimes relieved by heat.

Aurum causes exostoses, necrosis, caries and nightly bone pains, hence its use in syphilis. It bears a strong similarity to Mercurius but is said to be deep acting. There are dreadful pains in the head, crushing periosteal headaches; sensitive to touch; falling out of hair. There are exostoses on the skull. At times there is necrosis of the skull; caries of the bones of the ear and nose. We may use it for iritis with much pain around the eye, which seems to be deep in the bone and is aggravated by touch. In the nose there is ozaena with an exceedingly fetid discharge. There is caries of the nasal bones, so that the bridge gives away and the nose flattens, leaving the tip projecting, which is red and swollen. There is obstinate fetid otorrhea, and caries of the mastoid process. There are ulcers in the throat and palate with caries of the hard palate.

There are ulcers and chancres on genital organs with indurated and suppurating inguinal glands. There are dreadful boring pains in extremities, also exostoses and caries. During his sleep he is awakened by bone pains; the suffering is so great that he despairs and does not want to live. Upon the skin there are deep ulcers affecting the bones. There are also warts, scrofulous, sycotic, syphilitic and mercurial. There is great aggravation at night with these symptoms. These are the troubles that we use Aurum for in old syphilitics, especially those that have been drugged with mercury. When a Homoeopath has a case of syphilis to treat from the start, he never

has such a condition as is described above, but cures his patient before he reaches such a state. Now, with any or all of these symptoms, there are the mental symptoms present—hopelessness, despair, despondent, longing for death, thoughts of suicide. He wants to be cool but wants warmth for the pains.

Another condition that we may make use of Aurum for, is in certain kinds of heart disturbance. The heart commences to enlarge and seem as if it would fill up the chest. The force of the heart beat is increased. The eyes begin to protrude and the thyroid glands swells; hence if he has been used in exophthalmos. This hypertrophy of the heart produces a general hyperaemia. Sometimes it may be in the lungs. Then there is a sensation of extreme tightness of the chest or sensation of weight on the sternum. This is so great that breathing is very difficult. There is aggravation from any exertion and severe cases must be propped up in bed in order to breath. With this there will be rattling all through the chest and coughing for want of breath. Again, the liver may become congested and indurated. There will be white, constipated stools. Again the kidneys may be deranged from the constant hyperaemia, due to the disturbance of the heart. The urine becomes scanty and albuminous. There will be fatty degeneration of the kidney itself or it may become granular or cirrlosed. With this there will be dropsy, etc. The uterus may also become congested and indurated with bruised, shooting or drawing pains and prolapsus from the great weight. The prolapsus seems to be due to the great weight of the womb rather than a weakening of the supports. The menses are late and scanty, and there is profuse leucorrhea. Pregnancy becomes perverted. Instead of true pregnancy, a monster or mole is the result. The mammary glands and ovaries become indurated and enlarged. All of these disturbances seem to be due to or rather follow a perverted circulation. This condition is so marked that violent toothache associated with this heart disturbance has been cured by Aurum. Whether the trouble is in the chest, liver, kidneys, womb, etc., it must be preceded by the deranged circulation or Aurum is not the curative remedy.

The heart at first is merely excited, then comes hypertrophy and finally dilation, with any or all of the above diseases.

One thing to remember, whatever the trouble may be, the mental symptoms are always present. There must be present that utter hopelessness, despair and gloominess.

This, correctly understood, will give a general idea of *Aurum Metallicum*.

Hydrocotyle Asiatica for Uterine Affections.—By Dr. E. Nyssens in *Journal Belge d'Homeopathie*.

(Translated for the CRITIQUE by J. W. Harris, M. D., Denver, Colo.)

"Dr. Audouit has observed excellent results in cases of ulceration of cervix, being completely cured in a very short time. These are the symptoms which indicate the remedy, according to pathological and clinical observations: 'Dull aching pain in the region of ovaries. Pressing down in the uterus. Heat deep in the vagina, redness of the vulva and of the vagina, pricking and itching at the vulva. Irritation of the urethra. Redness of the cervix, disappearing on discontinuing the medicine, returning on administering it again. Much increase of the leucorrhoea. Violent pains in and around uterus like labor pains, after administering 4 drops of the 3 dil to a woman 25 years old. Pain in the uterus, also left side. Menstruation appears 4, 10 and even 14 days too soon, (observed upon women both well and sick).'

Hydrocotyle Asiatica has shown, by the same author, a curative action in the following cases. *Pruritus Vaginitis*. *Elephantiasis Graecorum*. *Lupus Excedens Nasi*. *Eczema Impetiginosum*. *Benign Pemphigus*. *Gangrene*. *Aortic Stenosis*. Unbearable itching of the soles of feet."

Amelioration by Secretions.—Dr. Dahlke notices that amelioration by the appearance of a secretion is usually referred to lachesis as an indication, while, in reality, there is a whole series of drugs having this peculiarity. In making a comparative study he finds them to be:

Lachesis.—General amelioration as soon as secretions appear; toothache during menstruation; the less the flow, the greater the pain.

Zincum Metallicum.—Pain in the left ovary, disappearing during the menstrual flow. The dyspnoea is ameliorated as soon

as expectoration appears (compare stannum and lachesis); sexual excitement in the male, which is made better by ejaculation (cf. stannum).

Moschus.—Drawing pains at the beginning of menstruation, which cease as soon as the flow sets in.

Graphites and Apis.—The pains in the right ovary diminish, and a vulvar secretion makes its appearance.

Senecio.—After menstruation commences, the thoracic and vesical symptoms decrease or disappear.

Kreasotum.—During the post-menstrual flow there is a certain pain which becomes decidedly aggravated as soon as it ceases entirely.

Conium, Ign., Lilium Tigrinum and Sulphur.—Cutting pains in the intestines, followed by leucorrhœa.

Cobalt.—Great pains in the left testicle, which is ameliorated by micturition.

Stannum.—Migraine, which is greatly bettered by vomiting (cf. arg. nitr.).

Plumbum.—The menstruation stops at the beginning of the colic.—*Journal Belge d'Homeopathie*, vol. iv., No. 3, 1897.—*Hahnemannian*.

OUR MONTHLY REVIEW.

The November Journals.

The Medical Era—During a period of five years in the Cook County Hospital, Chicago, 50,000 cases were treated by the physicians of the different schools. The record shows a lowered mortality rate of three per cent in favor of Homeopathy over all others. That would have been a saving of 1500 lives had all been under homeopathic treatment.

The *Era* says: "Whenever Homeopathy has had a fair chance to demonstrate its virtues, it has always shown itself, as a system of internal medicine, to be superior to any method with which it has been brought into competition."

An illustrated article on Symphysiotomy by Dr. M. W. Turner and read before the American Institute at Buffalo records a successful operation in a case of contracted pelvis where the child and mother both lived and made good recoveries.

In the treatment for Cystitis in Women, Dr. C. McElwee of St Louis would *first* give the indicated remedy; *second*, remove all foreign substances that hinder a cure by means of irrigation with a catheter and funnel, using such irrigating fluids as sterilized solution, normal salt-solution, hot solution of boracic acid, nitrate of silver one to 4000, bichloride of mercury one to five or ten thousand, peroxide of hydrogen or a weak solution of hydrastis one-eighth dram to the ounce; *Third*, sterilize the urine by the administration of such remedies as "salol," boracic acid, benzoic acid or salicylic acid and the use of demulcent drinks.

The American Homeopathist—In a quoted article two good points are made against the serum-therapy treatment of tuberculosis. *First*, human beings are unlike guinea pigs. Many drugs affect the two very differently and hence such tests are untrustworthy. *Second*, nature does not transfer disease with a hypodermic needle.

Homer I. Ostrom, M. D., New York, in writing on "The Dry Method in Operative Surgery", suggests that "Water is an almost universal solvent and will make many noxious substances ready for absorption, and assist in carrying poisons to different parts of the body." He also suggests that "moisture favors the

development of organic life," a generally conceded fact. In regard to the dry sponges used he says; "Almost any area, even an infected pus cavity, can be made clean with dry sponging, and there is the additional advantage that this method of sponging prevents to a very considerable extent the oozing from capillaries which forms such a troublesome feature of operations that involve a large extent of surface.

He mentions the following advantages of the dry method in abdominal surgery; *first*, the patient is not chilled with water; *second*, the discharge is more easily removed; *third*, the other parts of the abdomen do not become affected. With care in the use of the sponges the delicate serous membrane of the peritoneum need not be injured. He does not entirely discard the use of water but uses the dry method where it can be applied.

The Pacific Coast Journal of Homeopathy—A case of jaundice, following the prolonged use of calomel without a cure had beside the ordinary symptoms, "long and slender stools like pipe stems and voided urine with much straining." Because of the nature of the stools alumina and graphites both seemed indicated. Phosphorus was also indicated and was given in the 200th potency, a dose every two hours. But little benefit followed when nitric acid was given and improvement set in promptly. This antidote to the mercury proved to be the curative remedy, and with the help of a little more of the phosphorus, a cure was wrought in five weeks.

Editorial attention is drawn to the danger Californians are in from the great afflux of consumptives to that state. Reference is made to the history of Southren France and in certain parts of Italy and Spain, and other southern countries where it is claimed "the constant afflux of tuberculous patients in the late stages of the disease has gained a foothold which will not be easily broken." In the course of the article this strong language is used; "Wherever such a patient goes, he becomes a public nuisance, whether in the boarding house, ferry, street car or on the sidewalks of a city, leaving everywhere sickening masses of foul expectoration, offensive in the highest degree to every sense of propriety, and dangerous in the extreme to the

entire community." He finally called on "every lover of humanity" to aid in securing state legislation to correct the evil.

The New England Medical Gazette.—Conrad Wesselheft, M. D., writes on "The Comparison of Methods, not of Creeds the Basis of Affiliation of Schools." This is a strong article and contains these points: 1. Homeopathy may not press its claims to recognition from any civic rights such as the paying taxes, nor from the respectability of patrons. Such a rule would establish the rights of all sectarians even to Christian Scientists and others of that class, for they pay taxes and have respectable patrons. 2. Homeopaths should press their claims because of their superior therapeutic methods which should be put to the severest test, such as the most careful and impartial tests of the value of preventatives against diphtheria, cholera and tuberculosis, such as the authorities are using at present time in some of our cities. 3. If others have failed to recognize the superior methods and results of the Homeopaths, they have only themselves to blame for neglecting a duty "they owe to their patients if not to themselves." 4. The "regulars" are a "sect" of long standing and more illiberal than the Homeopaths who by the systematic inductive study of drugs, have come to possess a definite knowledge of their therapeutic value. 5. Bacteriological progress has been made by men independently of any therapeutic sect, and all physicians claim the right to avail themselves of the benefits of such progress. 6. Homeopaths declare it to be the duty of all physicians to find out the value of a safe use of the various anti-toxines in curing disease and that any who do not do this, are as guilty of a gross neglect of duty, as are the "regulars" when they refuse to thoroughly test the value of *similia*. 7. Homeopaths demand of "regulars" a recognition of the principles of Homeopathy as a method by the side of other methods, not antagonistic as heretofore but as filling out an ancient and wide gap in the service of therapeutics. 8. Contention should not be made for "sects" or "schools" but for "methods of treatment."

North American Journal of Homeopathy—An article on hypnotism under the head of "Suggestive Therapeutics" read before the Homeopathic Medical Society of Chicago, by Prof.

A. K. Crawford, makes a plea for a more careful study of hypnosis. The Professor considers it of special value in the treatment of "functional neurosis, functional disturbances of the viscera and slight ailments from indefinite sources;" also for "dipsomania, morphomania, and the tobacco habit."

Dr. Selden H. Talcott records the case of a woman, aged 26, cured of puerperal mania by senecio aureus 3x after the ordinary remedies had failed. The symptoms were; "mental excitement, pain in the head, great nervous irritability, sleeplessness, hysterical erethism and amenorrhea." Senecio is a valuable remedy in restoring the menstrual function which is often a *sine qua non* to the recovery of puerperal mania.

A leading editorial severely criticises Dr. Strickler for an article he had written "reflecting upon the American Institute." The editorial does not state as to just when or in what publication Dr. Strickler's article appeared.

The wide-awake editor of *The Era* has observed that the name of the Denver Journal of Homeopathy has been changed to *The Critique* and makes complimentary comments.

Eloquent Tribute to the Sympathetic Nerve by H. W. Roby, M. D., Topeka Kansas. This three page pamphlet is a reprint from the *Kansas Farmer* in which paper it had been published in the medical department columns. It affords most delightful reading because of its general eloquence and grace of style.

Subscribe for the Critique, \$1.00 Per Year.

THE CRITIQUE.

Formerly THE DENVER JOURNAL OF HOMEOPATHY.

SAMUEL S. SMYTHE, M. D., Editor.

W. A. BURR, M. D., Associate Editor. J. WYLIE ANDERSON, M. D., Managing Editor.

All books for review, magazines, exchanges, correspondence and articles for publication in this Journal should henceforth be sent to Dr. S. S. Smythe, Editor, 403 California Building, Denver, Colorado.

All business communications should be addressed to Dr. J. Wylie Anderson, 16 Steele Block, Denver, Colorado.

THE CRITIQUE has the largest circulation of any medical journal published west of the Missouri River. Hence is the best medium through which to advertise.

Judging from the tone of some of our big Eastern contemporaries we are led to believe that THE CRITIQUE got what the secular press would call a "Scoop", in our discussion of American Institute affairs. Basing our strictures upon facts drawn from the records, the matter could not very well be ignored as a whole, but it is quite amusing to observe the studied efforts of the journalists to avoid giving us credit. Our arguments are freely used, almost our very words, but not a word as to the source, except to speak generally of some of the smaller Western Journals, when the truth is, that no journal except our own, ever took up the question at all from our standpoint of logic and fact. True, we are not as large as a few of our older Eastern contemporaries, but we are larger than any of the newer ones and most of the old ones. Besides we have a name. We are not some but one Western Journal all by ourselves. Our contention in regard to the A. I. H. abuses was strictly professional, inspired by the purest loyalty; and personal considerations did not influence us in the least. However, if we have felt a little journalistic irritation over any seeming discourtesy, it has been abundantly assuaged by the reassuring letters which come from some of the most influential members of

the Institute endorsing our position, and asking us not to recede from it, until better methods prevail in the management of our great National Society. We are not at liberty to publish these letters, neither is it necessary or wise to do so. Coming from the sources they do, they are an earnest of what will be done at the next and at all future meetings of the Institute, and so we are content in the knowledge that we did the right thing at the right time.

It was not at all our intention to precipitate a contest. We desired simply to lay before the profession the fact that error had crept into our National body, and in order to do this successfully, we gave the necessary figures in support of our claim. There is nothing for you to defend gentlemen; nothing to be ashamed of. It is a matter of equal interest to every member of the Institute.

The Supreme Court of Illinois has given a knockout blow to the expert witness industry in that State, and we have no doubt other state courts will follow the example of Illinois. We believe it is a wise decision and in the interest of our profession, although the argument of the learned judge "that a professional man's technical knowledge was not different from any other knowledge and that to admit such a distinction would defeat the ends of justice," may not be demonstrated in practice.

It is within the province of the profession to refuse to give opinions on questions in which they have no actual knowledge of the facts, and decline to answer any hypothetical queries gotten up by lawyers biased on one or the other side of the case at issue. No honest physician can explicitly answer hypothetical questions relating to a particular case, because no such question can give him that peculiar personal knowledge on which every physician must depend in his endeavor to reach reliable conclusions.

THE CRITIQUE FOR 1898.



Dear Doctor:--Look over this number of THE CRITIQUE and then decide, if not already a subscriber, to give your support to the best Medical Journal published West of Chicago. Every Western Physician, at least, should aid us in pushing forward the cause of homeopathy in this territory. It costs but a dollar a year and each year we expect to make it larger and better. A reference to the index in this number will give you an idea of its scope and value. Fill out and mail to us the attached blank and we will give a wide-awake, up-to-date Medical Journal that will not fail to please you.

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Now let physicians refuse to become the hired tools of designing lawyers, and by this means maintain the dignity of our profession.

Dr. Henry M. Smith of New York, Treasurer of the Hahnemann Monument fund, visited Denver recently, and spent an evening with the local profession at the Brown Palace Hotel. The doctor exhibited models and plans of the monument and gave a most interesting talk upon the present condition and necessities of the great undertaking. We believe the doctor's visit will result in something practical for the cause, notwithstanding the hard times, and the fact that we in Denver are endeavoring to build up homeopathy by establishing a school and hospital, and the further fact that this work must be done at great personal sacrifice by a limited number of Denver physicians. We are just beginning a work which has already been accomplished in Eastern medical centers, and hence, while our hearts are in the cause, our ability to do will be more or less determined by local necessities.

THE LATEST. Another serum. From California. This time it is veal instead of horse. Perhaps that makes a difference. Any way, it is enough to give our scientific regulars and a few mongrel homeopaths another play at the poor deluded consumptive. Tuberculin was getting to drag very perceptibly. Antiseptin is nearly worked out. Koch's No. 3 was too much like No. 1. Something new had to come, and now it is veal bouillon boiled in hydrogen *per-oxide*. Koch didn't know any better than to use hydrogen *mon-oxide*. Peroxide was beyond him. He had never heard of this superior genius Hirschfelder of California. Alas, poor Koch!

"If you have tears, prepare to shed them now."

Homeopathy in Nebraska has a staunch and clear headed defender in Dr. Benjamin F. Baily, judging from the way he punctures the ignorance and egotism of one Dr. J. L. Sutherland in a discussion which has been going on in the *Western Medical Review*, a medical journal published at Lincoln Nebraska. He shows very conclusively that the rank and file of the old school have no actual knowledge of homeopathy; that their education is meager and bigoted; that they are not well informed in regard to their own school or their own authors, and that their minds are ruled by prejudice and presumption. While homeopathic physicians are broad and liberal and include in their reading the literature of all the schools, the allopath becomes narrow and selfish in consequence of a limited understanding only of his own dogmas. We regret that we have not space for a fuller report of doctor Bailey's argument.

THE JOURNAL OF HOMEOPATHIC SURGERY.

We take occasion to welcome in advance this new journal which is promised for January first, 1898. The time is ripe for such a publication, and we predict for it a substantial support from the start. Surgery has made such great strides in this country during the last decade that a large, well conducted journal devoted exclusively to homeopathic surgery is essential to the proper development of this branch in our school. Under the management of Dr. C. E. Fisher, the accomplished editor of *The Medical Century*, the profession may expect a journal worthy of their confidence and respect. One of its important features will be the development of homeopathic therapeutics in surgical conditions—and nothing can be more important than this. The intelligent application of homeopathic remedies in surgical diseases, is something, the value of which should be thoroughly impressed upon the minds of all our surgeons, and this can best be done in the columns of a journal wholly devoted to the discussion of surgical subjects. Homeopathic surgery is and should be better than any other surgery, because homeo-

pathic medication is better and safer than any other medication. All that is needed to demonstrate this fact to the mind of any one, is a loyal adherence to the principles of similia in the treatment of surgical conditions.

We wish the new journal abundant success and prosperity.

COLLEGE NEWS.

TALLY ONE FOR DENVER. Dr. Walter D. Spoor, who graduated from the Denver College in 1896 has located in Schenectady, New York, after having passed a most rigid examination before the State Board of Examiners. Dr. Spoor is to be congratulated, not only upon having successfully passed this examination as a whole, but also upon the fact that his average was such that he was placed upon the "Roll of Honor" by the Board, which means that he must have secured a rating of ninety per-cent. or more in each and every branch.

After the doctor graduated he was unanimously elected house physician and surgeon in The Denver Homeopathic Hospital, which position he filled to the satisfaction of all concerned up to the time of his departure for New York. Dr. Spoor writes us that he shall never regret having taken his degree from the Denver College, and that he holds in grateful remembrance his chosen Alma Mater.

The work at the College is going on this year in a most satisfactory manner. All the classes are making excellent progress in every department. Thirty-six clinics a week afford abundant opportunity for practical observation of disease in every phase. Besides these regular clinics, the special surgical clinics for the seniors and juniors have been unusually full and interesting. The teaching in all branches is direct and practical in contradistinction to the old-time didactic methods, which latter have small space in this college. Students are taught to do, as well as to hear and see. Theory is demonstrated in practice, and the students actively participate in all the clinical work of the college and hospital.

Of the 44 students in actual attendance, 9 are women and 35 men. The Freshman class of thirteen, is composed wholly

of young men. All of the classes are made up of bright, cultured men and women who will reflect credit upon their college and upon their profession. We are proud of them.

NOTES ON GONORRHOEA,

By F. C. McCurtain, M. D., Denver.

1. Aconite low for acute stage.
2. Belladonna if prepuce is swollen, red and shining.
3. Apis given where there is the characteristic puffiness of the prepuce will give good results.
4. Gelsemium when the discharge has been suddenly stopped and orchitis is developing, will start the discharge up and stop the orchitis.
5. Argentum Nitricum is valuable in purulent inflammations, with sensation as if urethra was drawn in knots.
6. Merc. Corrosivus when the orifice is inflamed and there is a greenish discharge, often painless, especially at night.
7. Sulphur, when other remedies apparently well selected, fail to give results.
8. Carbo Veg. may be useful when there are violent, burning pains in the urethra and extremely offensive discharge.
9. Don't forget Cantharis when cystitis develops. Farrington says it is indicated oftener than all other remedies in cystitis; particular indication is straining *after* urination.
10. Mygale Lasiadora for chordee, try it.
11. Aching at the orifice with shuddering, Nux Vomica.
12. Contraction of the passage, Bryonia, Pulsatilla, Sulphur.
13. Itching in the forepart of the urethra, Ignatia, Arnica, Merc. Sol.
14. Stinging when not urinating, Acid Phos.
15. Stitches, violent, extending its whole length, Conium.
16. For soreness of the orifice, Copaiba.
17. Discharge semen-like with burning pain, Pulsatilla.
18. Discharge of whitish or yellowish pus, Hep. Sulph. Calc.
19. Discharge yellow and thick, Capsicum.

A COMPARISON.—MEASLES.

In St Louis in 1891-2 the allopaths reported 969 cases of measles, with 65 deaths, mortality 6.7%: the homeopaths reported in the same time 170 cases without a death. What the allopaths don't know about treating measles would fill a book.

In Cincinnati in 1892-3-4, the allopaths reported 3082 cases of measles with 193 deaths, a mortality of 6.26%. In the same time the homeopaths reported 254 cases with 2 deaths, mortality 0.8 %. Our old school friends say there is nothing in homeopathy. Does the reader think the same can be said of old school medicine?

In Minneapolis in 1891-2-3 the allopaths reported 1935 cases of measles with 50 deaths, mortality per cent 2.58; in the same years the homeopaths treated 458 with 5 deaths, mortality 1.1 %. Do you wonder why the old school do not take kindly to comparative vital statistics?

In Indianapolis in 1891-2-3-4-5 the allopaths reported 3105 cases of measles with 27 deaths; the homeopaths 545 cases without a death. Why is it that allopathic measles are so much worse than homeopathic measles?

In Denver in 1891-2-3-4-5 the allopaths reported 316 cases of measles with 51 deaths; the homeopaths in the same years reported 83 cases with 3 deaths. At the same rate 40 of the 51 deaths were unnecessary. Will people ever learn that old school medicine does not compare with homeopathic in the cure of disease?

In all cities from which statistics were gathered from 1891 to 1895, inclusive, the allopaths reported 18,425 cases of measles with 735 deaths, a mortality of 3.99%; the homeopaths reported 2,758 cases, with 22 deaths, a mortality of 0.8 %. At the same rate the homeopaths would have saved 588 of the 735 cases lost by the allopaths. None are so blind as those who *will not* see.

DENVER HOMOEOPATHIC CLUB.

The Denver Homoeopathic Club met at the Brown Palace Hotel, Monday evening, November 29th, when the alumni of

the Denver Homoeopathic Medical College furnished the program for the evening. Dr. J. W. King taking the chair and Dr. Pearl Wheeler acting as Secretary. Dr. J. F. Darling opened by an excellent paper on Enteric Fever, which was freely and fully discussed by Drs. F. E. McCurtain, L. J. Pollock, Pearl B. Wheeler, Eugenia J. Reinhardt, and W. J. King.

The feature of the evening was the entire absence of any reference to homoeopathy or homoeopathic treatment. It was a novel program for a homoeopathic society but not devoid of humor, pathos, and education. Come again and give us some other innovations.

NOTES AND PERSONALS.

Doctor E. J. L. Robinson, late of New York City, called upon THE CRITIQUE. The doctor has made the study of chronic diseases a specialty.

Doctor Collins of Idaho Springs, came to Denver with a patient for the hospital. The doctor is meeting with success in her new field.

Mrs. Geo. W. Reed of Moffat, Colorado, is at the Denver Homeopathic Hospital where she is convalescing from a serious abdominal operation.

Some of the operations at the Homeopathic Hospital during the last month were: Sub-Mucous fibroid of uterus. Dilating and curetting uterus. Ovariectomy. Laparotomy. Dilating and Curetting uterus. Vaginal Hysterectomy. Amputation of thumb index and middle fingers.

Dr. W. A. Humphrey of Plattsmouth, Nebraska, spent a week in Denver last month, was a frequent visitor at the hospital and assisted in some of the operations.

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HOSPITAL CLINICS.

Reported by Walter J. King, M. D., Resident Physician, Denver Homeopathic Hospital.

Service of Prof. S. S. Smythe: Sub mucous Fibroid of the Uterus; Excision; Cure.—Case 372—Mrs. G.—aet forty, American. Mother of two children; one miscarriage at four months, three years after birth of second child. Health as a girl and young lady could not have been better; in fact, health was fine till 5 years ago. In 1892 she had a very severe attack of Peritonitis brought on by overexertion; a good recovery was made from this attack. Sexual abuses and cruelties of husband caused return of Peritonitis four times in the succeeding two years. Separated from her husband and has had but one very slight attack of Peritonitis since; this caused by a fall on a wet step. Menses were always regular in every respect. Patient has a magnificent constitution and has always been very active and energetic.

Two years ago commenced to be troubled with menorrhagia and metiorrhagia. There was a steady oozing night and day of bright red blood with a marked tendency to form large clots in the vagina. The Polypus was first noticed six months ago at which time it was the size of a walnut and protruded through the cervix. It steadily increased in size and when removed, October 28, was two and a half inches in diameter. The flow has been less the last two months but the patient was getting weaker and weaker, though she would not give up her housework and go to bed.

Patient admitted to the hospital October 26th, October 28th she was anaesthetized, oxygenated chloroform being given and the submucous fibroid excised at its base. The os was wide open so that dilation was not requisite; the fibroid was found to have a short pedicle and was attached just above the internal os by a broad base. The polypus was very fibrous and was as hard as a rock. Very little bleeding followed the excision of fibroid. The uterus was thoroughly curetted and washed out with a hot solution—25 per cent. of Calendula.

Service of Prof. S. S. Smythe: Intractable Hysteria; Cystic Degeneration of the Ovaries; Oophorectomy; Recovery.—Case 403—Mrs —, aet 35, Swede. Father had much rheumatism; mother was not strong and died of blood-poisoning. Husband and children in excellent health. Personal history: mother of three children; one miscarriage last July at three months, caused by falling down stairs; health has not been good since she was nine years old, at which time she had the measles. During recovery from the measles she had a slight hemorrhage from the lungs. This frightened her very much and she worried very much over it, cried a good deal and said "she was going to die" and complained of her head feeling so funny. Menses appeared at eighteen and while usually regular her periods were always painful; she would get dizzy and everything would

look black or sparkle before her eyes. She complained especially about her head and frequently would say she was "going to die." Flow was a little decreased in quantity, lasted four or five days; patient felt some better after the flow. Was hysterical frequently and always worse at the period. She consulted some fake doctor last spring and he pronounced her left lung gone; this increased her nervousness and her hysterical spasms became more frequent and lasted longer. Last summer she commenced to attend the gynecological clinic at the Dispensary of the Denver Homeopathic Medical College. Ovarian trouble was diagnosed; but for a time she seemed to improve and did gain a great deal in weight and felt better than for many months. However, the disease had progressed so far that medicine could not effect a cure and an operation advised.

November 13 under oxygenated chloroform, Prof. Smythe, assisted by Prof. Anderson performed Oophorectomy under aseptic precautions. It had been hoped that it would not be necessary to remove both ovaries, but on bringing them to view, each was found to be involved in a cystic degeneration and its removal imperative. Very little shock followed the operation and the patient has made an uneventful and splendid recovery outside of her mental condition, and this is improving nicely. She tried to back out at the last minute from the operation and said she was going to sleep and would never wake up. She took the anaesthetic finely and could not have done, since the operation, any better in any respect. But, owing to her long continued worry, she still exaggerates every little symptom—natural symptoms which we always expect to meet after a severe operation and at times repeats "I'm going to die, I am afraid I can't come over it." She is beginning to admit now that she will get well. Mental suggestion and the indicated remedy are rapidly bringing her back to health and strength and usefulness.

Services of Prof. S. S. Smythe: Antelexion: Dysmenorrhea: Sterility: Recovery.—Case 369—Mrs. —, aet 34, American. Health of patient was good and no trouble with menses until nine years ago. In 1888 she fell down a long flight of stairs striking every step as she fell. The next appearance of the menses was attended with marked dysmenorrhea and this symptom has accompanied every flow since. Menses have been regular, both as to time and quantity, but the paroxysm of pain was sometimes excruciating almost beyond endurance at the period.

OPERATION. Examination revealed the presence of antelexion. October 16th oxygenated chloroform was administered and complete divulsion of the cervix performed. The proper application of tampons in the anterior vaginal fornix was also followed as was rest in bed for two weeks after the dilation. She has menstruated twice since and both times without pain. As to the sterility we cannot say as yet but it is believed that this affliction was removed when its presumed cause—the antelexion and dysmenorrhea—were removed.

CORRESPONDENCE.

[The following letter was inadvertently omitted from November issue. We hope some of our Denver ladies will volunteer to take up this work in Colorado.—Editor.]

Buffalo, N. Y., Oct. 30, 1897.

The Critique, S. S. Smythe, M. D., Editor.

Dear Doctor:—I have the honor to inclose samples of our circulars, that you may know something of the organization recently formed to assist in raising money to complete and erect the Hahnemann Monument. The magnitude of the work, which we shall endeavor to render of national importance, suggests to us the propriety as well as necessity of asking for publicity through the medium of the homeopathic medical journals. To that end we appeal to your valuable columns. Our local committees, as soon as organized, will not only call upon the laity for contributions of money, but also upon all physicians who have not already given to this object. The plan which has been adopted, is to have every State in the Union represented by at least *one* Honorary Vice-President. There will also be a Chairman in every city and considerable town. These officers are being appointed as rapidly as circumstances will permit; and as they and their local committees will be authorized to proceed at once with the work, we trust it may not be long before our Treasurer, Mrs. A. R. Wright, may receive remittances from various sources, all of which will be promptly acknowledged.

With your co-operation, and that of physicians generally, we hope to report satisfactory results to the committee of the A. I. H. Any assistance you will render for the glory of Hahnemann and Homeopathy will be gratefully appreciated by the committee.

Cordially Yours,

MRS. JOSEPH T. COOK, President.

Topeka, Kansas, Nov. 28, 1897.

Editor Critique, Denver, Colo.

Dear Sir:—In your November issue you seem to be greatly alarmed at the new departure of the profession in Kansas, and in your fright you swing your war club furiously in our direction, and pour out your vials of wrath on the heads of the allopathic branch of the fraternity. Will you please take the advice of a friend and let up on that kind of warfare. Wait at least until there is some real, tangible cause for putting on war paint and giving the Rocky Mountain yell. Kansas is allright, and please don't forget it. She has been the mother of more genuine reforms in politics, law, religion and medicine than any other State in the Union. In social reforms she has no peer, and to Kansas the world must look for the abrogation of the old, selfish and cruel ostracisms of the warring schools of medicine, and she has sounded the bugle call to a new emancipation, and obedient to that call the clans will gather, and men long held apart by prejudice will strike hands in the high society of manly fraternity. All

the schools are engaged in the same great struggle against a common foe for the betterment of human health and lengthening the span of longevity. And in Kansas the world will see the first demonstration of the Master's prevision of "Peace on earth, good will towards men." It is a false indictment to charge eternal malevolence against any school of practice in the dawn of the twentieth century. True, there are those of the old school who still cherish their inherited prejudice against the newer school, but it is equally true that there are querulous, captious members of the new school who blindly refuse to see any good, or any kindly intentions in the older school. But fortunately, these two classes are in the minority in this State, and that minority will dwindle to an insignificant band in liberty loving, fair play Kansas.

I sincerely hope that the homeopathic press, both east and west, will now show itself honest and generous enough to let up on flinging their maledictions at the Kansas fraternity, and let us set the pace for a higher comity and a better agreement in the ranks of medicine. We are ripe and ready for it. We have been steadily growing up to that better relation, while the profession in other States has gone bitterly on cracking skulls and making asses of themselves. The old school in Kansas has at last taken the step and made a record that the medical world shall forever be proud of, and the laity may forever commend.

The Kansas doctor is all right. Just watch him.

H. W. Roby, M. D.

THE OMAHA MEETING A RECORD BREAKER.

TO THE CRITIQUE:—

The Local Committee of Arrangements for the 1898 Session of the American Institute of Homeopathy at Omaha is well organized and at work. They held a banquet recently to which the physicians of Nebraska and Western Iowa were invited, and an enjoyable evening was spent in discussing plans for the next meeting of the Institute. It has been determined by the western physicians to make the Omaha meeting a record breaker in point of attendance and new members.

While there will be many attractions in Omaha which will be of great interest to all visitors, it is the plan of the Local Committee to not interfere seriously with the regular program and business of the Institute. The success of the great Trans-Mississippi and International Exposition is already assured. It will be second only to the World's Fair in national importance and beauty of design.

The various buildings are already nearing completion. The Exposition will open on time and the Medical press will be kept in touch with the special features of this great Exposition.

Following the meeting of the Institute there will be carefully planned excursions to the Rocky Mountains and the West, including trips to the Black Hills, Yellowstone Park, and points of interest in Utah, Colorado, etc.

It has been thought best by the Chairman of the Committee of Ar-

rangements, Dr. O. S. Wood, to appoint every Homeopathic physician in Nebraska and Western Iowa a member of the Local Committee of Arrangements. The different chairmen of the sub-committees are as follows:

Excursions, Dr. H. A. Worley, Omaha. Press and Correspondence, Dr. D. A. Foote, Omaha. Halls and Places of Meeting, Dr. S. J. Quinby, Omaha. Railroads, Dr. R. W. Connell, Omaha. Hotels and Alumni Banquets, Dr. C. H. McDowell, Omaha. Receiving and Locating Guests, Dr. F. E. Teal, Omaha. Information Bureau, Dr. Martha Clark, Omaha. Introductory Exercises, Dr. J. E. Mann, Omaha. Finance and Exhibits, Dr. W. H. Hanchett, Omaha. Co-operation of Council Bluffs Physicians, Dr. C. G. Sprague, Omaha. Co-operation of Hahnemann Institute, Iowa, Dr. A. P. Hanchett, Council Bluffs. New Iowa Members for American Institute, Dr. P. J. Montgomery, Council Bluffs. Invitations and New Members, Dr. P. C. Moriarty, Omaha.

D. A. Foote, Sec'y.

O. S. Wood, M. D., Chairman.

THE DATE OF THE NEXT INSTITUTE MEETING.

We are in receipt of a letter from Dr. Genevieve Tucker of Pueblo, Colorado, calling attention to the fact that the General Federation of Women's Clubs will meet in Denver June 22 to 28 inclusive. She says: "These dates are fixed and cannot be changed. The Federation stands for nearly half a million of women. All women in Colorado are busy planning for this meeting. Many of our homeopathic women are prominent in the Federation and will wish to attend, as Mrs. Helmuth, Mrs. Talbot and others." She also points out the importance of so fixing the date of the Institute Meeting at Omaha as not to conflict with the Federation Meeting, and to allow the homeopathic women physicians to attend both meetings; otherwise, if limited to one, they will prefer the Denver meeting.

We see no reason why the Omaha meeting may not be held just before or just after the dates fixed for the Federation Meeting, and take this occasion to call the attention of the Executive Committee to Dr. Tuckers suggestion.

A NEW GALACTAGOGUE.—SURE THING.

The following authentic story was recently received by letter to the editor of THE CRITIQUE from a brother physician. The story being told at the expense of his wife.

It was like this: "My wife advised an old maid rooming next door to us to take Fairchild's Essence of Pepsine, thinking that it would help her by exciting the flow of gastric juice—she manages to pick up a whole lot about things that pertain to common ailments! Well, looking at the dyspeptic woman, she said: 'It's just what you need!' 'What will it do?' inquired the old maid. 'It will start the lacteal fluid!' was her reply.

Well, say! I found my buttons scattered all about the house the next morning.

And now comes the real joke about the whole business: The old maid got the preparation, and has been taking it three times daily for a month; she now writes love sketches in verse; talks much of marriage; and night before last she dreamed of having a child at her breast!!! Who knows but the very suggestion will make my wife the father of the—— but my feelings are so wrought up I can't continue! A new era of psychology is near at hand, when by suggestion, not only a woman's reputation may be blasted, her character lost, and a too-confiding woman may—— but say! Look out for Fairchild's Pepsine!"

WHAT THEY SAY ABOUT THE CRITIQUE.

I congratulate you upon the Critique.—A. R. WRIGHT, M. D., President of the A. I. H.

And now the DENVER JOURNAL OF HOMEOPATHY, which has recently been coming more prominently before the profession than ever before, has gone and changed its name to the unmeaning one of "THE CRITIQUE." Mistake, Brother Smythe; your old name meant and stood for something. The new one——?—*Medical Century*.

And here comes another journal with change of name. The "DENVER JOURNAL OF HOMEOPATHY" is now "THE CRITIQUE." But by whatever name it comes we shall always welcome that bright and newsy journal, published under the shadow of the Mount of the Holy Cross.—*Med. Era*.

I wish to congratulate you upon your new name. It is short, convenient, expressive and dignified.—D. A. FOOTE, M. D., Omaha, Neb.

I think you should be heartily congratulated on the great improvement in every way of the new journal.—GENEVIEVE TUCKER, M. D., Pueblo, Colo.

Enclosed please find \$1.00 for a year of THE CRITIQUE, which is certainly a very live journal.—E. W. BORDMAN, M. D., Parson, Kansas.

Your journal in its new frock makes quite a pretty appearance.—A. C. STEWART, M. D., Durango, Colo.

The "DENVER JOURNAL OF HOMEOPATHY," for reasons sufficient to itself, has also changed its name to that of "THE CRITIQUE." In all other things it is the same.—*The Hahnemannian Monthly*.

Enclosed please find my check for \$5.00 which you will please apply on my account. I feel ashamed in not supporting better so excellent a journal as yours, but your September number exceeds them all in excellence. Please accept my individual and collective thanks for sending it.—C. F. MENINGER, M. D., Topeka, Kansas.

PUBLISHERS NOTES.

The latest and neatest unguent on the market is the preparation of McKesson and Robbins, (Alboline) this answers all requirements of U. S. P. Petrolatum, and is far superior to any of its preparations. It is white and clean, odorless, and readily melts at the ordinary temperature. "It is a sure soft thing".
C. E. Tennant.

What would you do if war should be declared to-morrow with a European power? How would it change your home life, the lives of your brother and other relatives? How would it affect your business connections and business? What changes would it make in financial, city, state and national affairs? It is these interesting problems which a writer in the December *Cosmopolitan* has undertaken to sketch under the heading of "A Brief History of Our Late War With Spain," at the same time vividly describing the exciting scenes which would attend the opening of hostilities. This same number of *The Cosmopolitan* has an article on "The Well-dressed Woman" by Elsie de Wolfe, a contrast of the characters of Henry George and Charles A. Dana by John Brisben Walker in another place "The Loves of Goethe," while Wells' story, "The War of the Worlds," which has been so widely read, reaches its conclusion in an unexpected way.

BOOK REVIEWS.

A Practical Treatise on Appendicitis.—Prepared especially for the use of students and general practitioners, by Howard Crutcher, M. D., Professor of Surgical Anatomy and the Principles of Surgery in The Dunham Medical College, Chicago; Surgeon to The Dunham Free Dispensary; Consulting Surgeon to The Garfield Park Sanitarium, etc., etc, Hahnemann Publishing Company, Chicago, 1897. Price \$1.50 net.

The author of this excellent book has done the profession a service by the very clear and comprehensive manner in which he has presented a difficult subject; difficult because of the wide difference of opinion which has prevailed throughout the profession in all parts of the world. It is the most systematic and satisfactory work on appendicitis we have had the pleasure of examining, and will go far towards harmonizing the differences which now exist.

There are two sides to this question, no doubt—a medical and a surgical—but whoever will read Dr. Crutcher's work carefully will be convinced that the two are not inimical and that both are essential to a thorough comprehension of the disease and its successful treatment. The book will be found exceedingly valuable by all physicians and surgeons. The etiology, diagnosis, prognosis, and the treatment are all so clearly given as to be readily comprehended at a glance. The operative treatment is given in great detail and is beyond criticism.

EYE-STRAIN IN HEALTH AND DISEASE. With Special Recerene to the Amelioration or Cure of Chronic Nervous Derangements, without the Aid of Drugs.—By Ambrose L. Ranney, A. M., M. D., Author of "Lectures on Nervous Diseases", "The Applied Anatomy of the Nervous System", etc., etc. Illustrated with 38 wood cuts. One volume, Royal Octavo, p. p. VII-321. Extra cloth, Beveled Edges, \$2.00 net. The F. A. Davis Co., Publishers, 1914 and 1916 Cherry St., Philadelphia; 117 W. 42 Street N. Y.; 9 Lakeside Building, Chicago.

The volume comprises the substance of several monographs the author has published from time to time during the past ten years in medical journals, together with much additional new matter. The histories of many typical cases illustrating remarkable results of eye treatment alone upon various forms of nervous disturbauces that have persisted for years and failed to yield to any other form of treatment, are added.

He reiterates the views advanced in his work on Nervous Diseases, relative to the effects of eye-strain upon the development of headache, neuralgia, sleeplessness, chorea, epilepsy, nervous prostration, and insanity, in which he states that time has strengthened his early convictions, and "while many of those who were antagonistic to those views years ago are now enthusiastic in their support."

He gives clear and concise methods of examining for refractive errors and for the different forms of heterophoria by following which a beginner may arrive at some definite conclusions regarding the presence or absence of eye-strain. None of the cases reported took drugs while under his care; they were chronic cases cured by eye treatment alone.

The author is a forcible and very entertaining writer. While we are disposed to think him a little too enthusiastic in his views, we do not hesitate to recommend the book to all who are not familiar with eye-strain as a factor in the production of neuroses.

D. A. S.

Mother, Baby, and Nursery.—By Dr. Genevieve Tucker. A book for mothers. Fully illustrated. Small 4to. Cloth. Price, \$1.50. Mailed postpaid, on receipt of price, by the publishers, Roberts Brothers, 3 Somerset Street, Boston, Mass.

The object of the author in presenting this work is to furnish a practical summary of the infant's hygiene and physical development. The aim of the book is to be a guide to mothers, particularly young and inexperienced ones. It purposes to teach and help a mother to understand her babe, to feed it properly, to place it in healthful surroundings, and to watch its growth and development with intelligence, and thus relieve in a measure the undue anxiety and nervous uncertainty of a new mother. The book is not intended in any measure to take the place of a physician, but rather to aid the physician, in teaching the mother to care properly for her babe when well, that she may better nurse it when sick.

Contents.—Heredity. Prenatal Period. The Little Stranger. Growth and Development. Bathing. Dress. Sleep. Crying Babies. The Eyes. Nursing. The Wet-Nurse. Weaning. Feeding after Weaning. Teething. Hand-Feeding. Bowels and Kidneys. Posture. Exercise. Habit. A Study of Babies. The Baby's Basket. Nursery Pointers. Nursery Don'ts.

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AND

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HYDROZONE

(30 volumes preserved aqueous solution of H_2O_2)

IS THE MOST POWERFUL ANTISEPTIC AND PUS DESTROYER.
HARMLESS STIMULANT TO HEALTHY GRANULATIONS.

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IS THE MOST POWERFUL HEALING
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These Remedies cure all Diseases caused by Germs.
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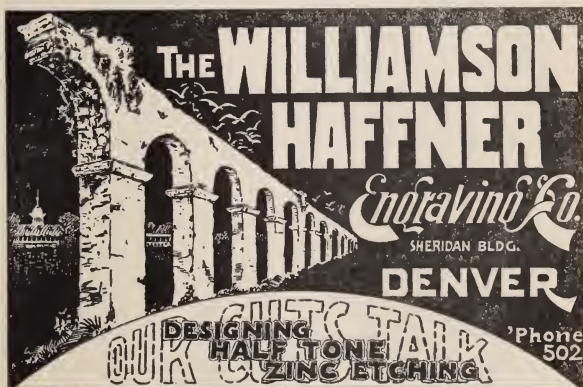
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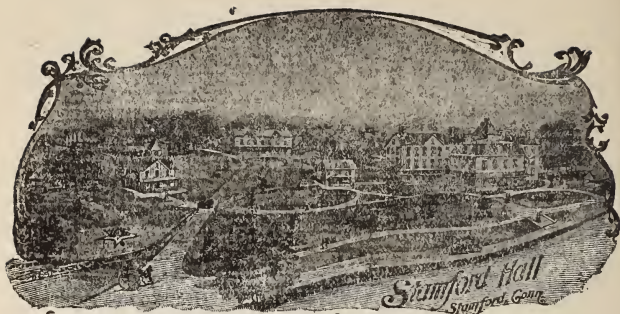


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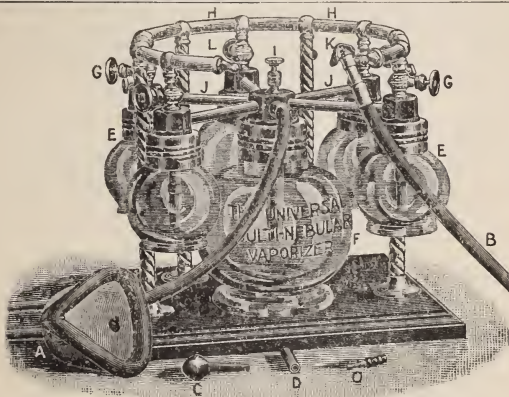
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